

AMERICAN JOURNAL OF INSANITY.

VOL. XVII.

UTICA, OCTOBER, 1860.

No. 2.

ESSAYS, CASES, AND SELECTIONS.

ON A FORM OF INSANITY FOR WHICH THE NAME OF
CONGESTIVE MANIA HAS BEEN PROPOSED. By J. H.
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*Read before the Association of Medical Superintendents of Amer-
ican Institutions for the Insane.*

THE question whether disorders of the nervous system are increas-
ing in a more rapid ratio than that of the population of our country,
is one of deep interest, and though there may be no sufficient data
for deciding it in the affirmative, there are strong reasons for believ-
ing that facts would justify such a conclusion.

We have only to consider the large number of patients affected
with the worst and most dangerous forms of insanity, collected to-
gether in the hospitals of the large cities of England and France,
and the rapid increase of our own cities and towns, in which an ar-
tificial and luxurious mode of living on one hand, and the cares and
anxiety of securing a livelihood in the midst of the competition of a
dense population on the other, are assimilating all classes of society
more and more to the circumstances of the residents of the large

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European cities, to be convinced of the dangers which await us from the increase of causes which have proved to be most productive of the severer forms of mental disorder.

It is to be hoped that so extensive a prevalence of the worst grades of insanity, culminating in general paralysis, as exists at this time in the hospitals of Europe, may never be witnessed in this country. There is, however, a form of cerebral disorder presenting some of the prominent mental characteristics of general paralysis, and arising from the same causes, which, it appears to me, is on the increase in our large cities, and which I have thought might profitably claim the attention of the Association.

The mental disorder in this class of cases, of which I propose to give a brief description, I have always been in the habit of considering as symptomatic of some grave organic lesion of the brain. From the commencement of the attack, the intellectual disorder is strikingly different from that which is manifested in ordinary insanity. It may appear under any of the usual forms of insanity. The patient may be excited, as in mania and monomania, or depressed, as in melancholia; but, in addition to emotional disorder and the delusions which are prominent characters of these forms of insanity, there are evidences of decided intellectual impairment. The memory is, I believe, nearly always more or less affected, sometimes to the extent of completely blotting out every event of the past life. The patient is generally unable to note the lapse of time, or to form a correct idea of his locality, or of the circumstances by which he is surrounded. Persons affected with this form of insanity are frequently in error respecting their place of abode;—if in a public institution fancying that they are in a hotel, and that they have business requiring attention in the next street. The merchant has some important engagement, the physician his patients whom he is anxious to visit, and the mechanic imagines he has been engaged in his daily occupation, and wishes to return to his family who are expecting him. In these cases the memory, if not entirely null, is so far impaired that the patient is unable to connect his present with his former situation by an intervening chain of events, by which means his erroneous conceptions might be corrected.

The degree of mental impairment which always exists in these cases, indicating a serious lesion of the cerebral structure, and the consequent gravity of the prognosis, seems to require that they should be distinguished from cases of simple insanity, in which the mental manifestations and termination are so different. The mental condition peculiar to them is scarcely ever observed to originate during the progress of ordinary mania or melancholia. On the other hand, their characteristic physiognomy is strongly impressed upon them from the beginning; so that you will be able to say, with great certainty, that a case is incurable, when otherwise the recent origin of the disorder would warrant the strongest expectations of recovery.

In some of these cases the insanity, consisting mainly of the most extravagant delusions respecting the wealth or social position of the patient, very closely resembles that form of mental aberration which was until recently considered as almost exclusively belonging to general paralysis. A distinguished French alienist* has not hesitated to class these with the last named disease, even before the appearance of the slightest symptom of paralysis. Another celebrated authority,† while recognizing the serious character of these cases, and believing that they frequently end in paralytic insanity, is still unwilling that they should be distinguished from cases of simple insanity, until evidences of impaired muscular action are unequivocally present. A third equally eminent name‡ has declared in favor of separating these cases from simple insanity on the one hand, and from general paralysis on the other, and making of them a distinct class, under the name of "congestive mania." This term seems well adapted to express the character of the cases which I propose to describe, and I make use of it rather as a matter of convenience than for the purpose of dignifying them with the rank of a distinct disease.

The prominent mental characteristic of congestive mania is di-

* Dr. J. Falret, *Annales Médico-Psychologiques*, tome v, p. 127.

† Dr. Parchappe, *Annales Médico-Psychologiques*, tome v, p. 479.

‡ Dr. Baillarger, *Annales Médico-Psychologiques*, tome iv, p. 579.

minished power, which is manifested chiefly by confusion of ideas, incoherence of language, and impaired memory. The term confusion of ideas seems to me very expressive of that condition of mental chaos in which—

“Congestaque eodem
Non bene junctarum discordia semina rerum;”

in which the discordant elements of thought are so confused and mingled together, that the patient is unable to arrange them in an orderly and connected manner. The incoherence differs from that observed in ordinary mania, which results from an exuberance of ideas struggling, as it were, for expression, and forcing themselves into utterance without any regard to orderly arrangement; while in this form of mania, the want of coherence is owing rather to the absence of that mental vigor which is necessary for following out a connected train of thought.

Failure of memory is, however, the most striking indication of the intellectual impairment. It is not unusual, when patients affected with this form of insanity are taken to a public institution, for them to retain but very indistinct recollections of their journey, and these even may be very soon entirely obliterated. When left by their friends they scarcely inquire after them, or realize the novelty of their position. They imagine themselves to be engaged about their customary business, because they are unable to draw correct conclusions respecting their position from the circumstances in which they are placed, and because their memory fails to present to their minds the succession of occurrences which is necessary to connect, and at the same time to separate their past and present. Patients affected with simple insanity, when placed for medical care in an institution, generally recognize at once the character of the establishment, and frequently manifest considerable ingenuity in framing reasons for their confinement, which may appear to themselves or others consistent with the theory of their own mental integrity. The profound mental impairment of those affected with congestive mania is shown, on the other hand, by the fact, that they are seldom aware of the nature of the institution in which they may be temporarily residing.

and, if they are partially conscious at intervals of their confinement, they can discover nothing in the fact that is inconsistent with the ideas they entertain of their perfect mental and physical health, or of their exalted station and influence, and never seem to feel the necessity of doing away with the imputation of insanity by explaining why they, who are perfectly sane, should be placed in confinement with lunatics. Those affected with simple madness often display great energy and perseverance in the pursuit of an object, and are very ingenious in adapting their means to the end in view. In congestive mania, on the other hand, patients seldom manifest much perseverance in the accomplishment of their designs, and when they do so the means they employ are often ludicrously disproportionate to the results they anticipate. Sometimes, as in ordinary mania, patients manifest considerable muscular energy and activity, and a strong desire to be in motion, but their activity is generally without an object, and appears to be mechanical rather than voluntary.

The form which the mental disorder assumes in congestive mania varies in different cases, and is dependent upon the predominance of emotional excitement on the one hand, or of depression on the other. The patient sometimes presents the wild excitement of the highest grades of ordinary mania. He may be violent, destructive and noisy, and as he is, in consequence of the impairment of his reasoning powers, incapable of being influenced by any appeal to his better judgment, he is frequently very difficult to control. In many cases the emotional condition partakes of that gay and expansive character, which has been so frequently described as a symptom of general paralysis. The patient is pleased with himself and every one with whom he comes in contact. He entertains the most extravagant delusions respecting his fortune, his social position, or his personal influence. He believes himself the possessor of immense wealth, and has offices, gifts or preferments to bestow upon all. He forms the most magnificent schemes for his own and the aggrandizement of his friends, and is most profuse in his promises to those whom he is desirous of enlisting in his service. He thinks himself in perfect physical health, and possessed of great muscular strength, and distin-

guished mental abilities. These patients are frequently subject to hallucinations, especially of hearing, and voices at enormous distances, which no other ear can hear, are plainly audible to them; and they thus hold conversations with the Almighty, or with distant or departed friends. Their manner is frank, open and free, and their whole figure and expression manifest the highest degree of satisfaction, contentment and happiness.

The prominent delusions, on the other hand, may be of a painful character. The patient will be impressed with the conviction that his sins have incurred the Divine displeasure, and that he can never obtain forgiveness. They sometimes accuse themselves of great crimes, which they say they have secretly committed, and believe that their malady, of which they are to some extent conscious, is sent as a judgment from Heaven to punish them. They believe that their misdeeds have brought extreme distress upon their families, and all that are most dear to them; or that they have rendered themselves amenable to justice, and that the institution where they may have been placed for medical treatment is a prison where they have been sent for punishment, and where they are doomed to undergo the most dreadful tortures. They imagine that they are to be burned or flayed alive; that they are to be scalded to death; that they are to be shot, or hanged, or poisoned. They are frequently harassed by hallucinations, and fancy that they hear voices threatening them with punishment, or devising means for their torture. In some instances they voluntarily seek death, as the only mode of escape from their sufferings; in others, under the impression that it is sinful to eat, or because God has forbidden them to do so, they refuse nourishment for long periods, and in consequence become extremely weak and emaciated. They frequently imagine themselves to be the victims of some secret persecution, and that their enemies are seeking means to compass their destruction. They believe themselves acted on by some mysterious influence, which they call magnetism or electricity, and by which they suppose their enemies are able to injure them without fear of discovery.

In another class of cases the emotional disturbance may be very

slight, even at the commencement of the attack, and there may be very little outward manifestation, either in language or conduct, of the serious nature of the disease, which may have fastened itself irremediably upon the patient. He may quietly entertain some delusion respecting his fortune or social position, or believe himself under the special guidance and protection of the Almighty, and may be subject to various hallucinations, while his language and deportment, to common observation, may be those of a sane person. But in these cases there is always marked impairment of the mental faculties, under the form of enfeebled memory, or inability to comprehend any subject upon which you may wish to fix his attention. When conversing with a case of this description, you will sometimes be made painfully sensible of the futility of every effort to impress him with a new idea, while he may perhaps talk sensibly and rationally on subjects with which he is already familiar.

The above are the prominent mental characteristics of the cases of insanity which I propose to describe under the name of congestive mania. The most of the symptoms which have been named are, however, met with in cases of simple insanity, under one or another of its various forms, and I would now call the attention of the Association to a different class of symptoms, which may be considered as peculiar to the congestive form of the disease, and therefore as distinguishing it from simple insanity. These are the physical phenomena indicating the congestive character of the disease, which has attacked the nervous centres.

Among the general symptoms peculiar to congestive mania, are those which indicate cerebral oppression; and these may vary from slight giddiness or confusion of ideas, to the most complete deprivation of sense and motion. Instead of the heightened sensibility to external impressions, which is a striking characteristic of simple mania, there is always in the congestive form diminished acuteness of perception. Though the organs of the special senses may be perfect, the brain seems incapable of receiving clear and distinct impressions of outward objects, so that the patient rarely forms correct ideas of the circumstances in the midst of which he is placed. As in gene-

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ral paralysis, there is diminished sensibility to pain, and in some instances, where the congestion extends to the portions of the brain supplying nerves to the sensitive organs, there is impairment of vision or of the senses of smell and taste, and patients sometimes experience a sensation of numbness in the extremities. Another set of symptoms which indicate cerebral congestion, are those which, without amounting to paralysis, are yet evidences of diminished muscular power; such as tremulousness of the hands, lips or tongue, unequal dilatation of the pupils, and indistinct articulation, when it is slight, and when it is observed only at long intervals. In some cases the whole muscular system seems to be remarkably deficient in energy. The patient walks bending forward, or with a shuffling motion of the feet, and all his movements are stiff and constrained; or he reels from side to side in walking, like an intoxicated person. In other cases there is evident though slight paralysis, which is frequently temporary, confined to a single muscle or set of muscles, and manifested by the drooping of an eyelid or slight relaxation of the muscles of one side of the face. There are cases, again, where the muscular system is affected with spasm—there may be grinding of the teeth, or muscular jerkings of the extremities, or the whole system may be affected with convulsions which closely resemble those of epilepsy.

In some cases the disease commences with an attack of cerebral congestion, during which the patient remains unconscious for perhaps only a short period. On recovering consciousness he will appear confused and bewildered, and the mental disorder will gradually increase until it amounts to decided insanity. At the same time the pupils may be unequally dilated, or muscular tremors may be observed in the tongue or lips, or in the upper extremities. In other cases there may be several attacks of unconsciousness, without any appearance of mental aberration for a considerable time. In others, again, the congestion may be so slight as not to render the patient unconscious, and he will complain only of giddiness and confusion of ideas, until at length mental disorder will become more manifest.

In another class of cases the mental aberration exists for a considerable time before the physical symptoms, indicating the nature

of the disease, make their appearance. Here, however, the insanity generally manifests that peculiar tendency to dementia, which has been mentioned above as denoting the congestive form of the disease. After the attack has existed for several weeks or months, the patient will be found exhibiting symptoms of decided cerebral congestion. Having previously been in a condition of high mental excitement, he will all at once appear silent, subdued and bewildered, he will be unable to comprehend anything that is said to him, will perhaps be unable to speak, and in walking his body will incline to one side. These symptoms may continue for a few hours, and under appropriate treatment the patient may gradually be restored to his former condition, or they may speedily be followed by an attack of convulsions resembling epilepsy, succeeded by coma of many hours duration.

Some of these cases are presented under the sub-acute form, and resemble somewhat that affection which has been described by Dr. Bell of Massachusetts as a new form of disease, by different authors under the name of acute delirium, and by Dr. Calmeil as insidious peri-encephalitis. Patients manifesting the symptoms which have been described under the above names, sometimes linger a considerable time, and before death, and even during the whole progress of their disease, present tremors and other signs of muscular impairment, which have been described above as peculiar to this form of disease, and as indicative of cerebral congestion. In these cases the patient sleeps but little, and the digestive functions become seriously implicated. The natural desire for food and drinks is entirely lost, the tongue is covered with a thick fur, and at length becomes dry and brown, the breath has a peculiar acid or an offensive odor, emaciation rapidly progresses, eschars form on the parts of the body most subject to pressure, and the patient dies, apparently exhausted in consequence of long continued nervous irritation, and impairment of the nutritive functions, rather than from the direct action of the disease upon the brain itself.

In congestive mania there is a strong tendency of the system to that form of general, functional impairment, which has been des-

eribed by Dr. Parchappe under the name of *cerebral marasmus*. Under the influence of the various painful delusions from which these patients so frequently suffer, but more especially owing to the depressing effect of the cerebral disorder upon all the functions, the vital powers become gradually exhausted. Sometimes, even when food is taken freely and regularly, the patient rapidly emaciates, and his muscular strength diminishes, until he is no longer able to keep on his feet. In these cases of marasmus there is frequently a tendency to the formation of abscesses in the subcutaneous cellular tissue, which may thus become infiltrated with pus in large quantities. The mucous membranes appear to be particularly disposed to take on inflammation, and troublesome diarrhœa or bronchitis frequently sets in. The circulation gradually becomes weaker, and eschars form over the sacrum or trochanters. All these complications tend to exhaust the remaining strength of the patient, and to hasten the fatal termination of the disease.

In some cases where the patient has remained stationary for a considerable time, enjoying a good share of bodily health, symptoms of acute cerebral disease will be all at once presented. The pulse will become frequent, there will be almost entire absence of sleep, the delusions will be of the most painful and distressing character, the patient will be in constant agitation and will require to be kept in bed by main force, and will obstinately refuse food and medicine and every attention that his case requires. With these symptoms he will go on from bad to worse for several days, when he will suddenly be found in a sinking condition, and die in a few hours in a state of profound collapse. In other cases a comatose condition, sometimes preceded by convulsions, at others becoming more gradually established, makes its appearance, and is followed by death in a few hours.

Some cases occurring in young persons of good constitutions, who have presented the symptoms indicating a slight degree of cerebral congestion, are gradually restored to mental health and vigor. In other cases, though the delusions and all emotional disturbance have vanished, and there is no decided symptom of mental disorder remaining, there is something about the patient which leaves a doubt

on the mind of the physician of his entire recovery. In these cases there is a slowness and manifest effort in the intellectual operations, which clearly show the injury which the organ of thought has sustained, and its consequent unfitness for performing its functions with the quickness and ease natural to it in health. Such patients are liable to a renewal of the original cerebral disorder, which may be of so aggravated a character as speedily to destroy life, or the brain may only be injured to an extent which leaves the patient permanently demented. In some cases the disease, after a course of many months, takes on the characters of general paralysis. The patient gradually loses the power of articulation, his gait becomes unsteady, his limbs at length refuse to support his weight, and all the symptoms of that form of cerebral disease are fully established.

The character of the mental aberration—the chaotic confusion of ideas, the incoherence, the impairment or loss of memory, the inability of the patient to form correct conclusions respecting his locality from surrounding objects, all indicating a profound lesion of the intelligence—will in any case of insanity of recent origin be sufficient to arouse the fears of the practical alienist, who will at once conclude that in a case presenting this form of aberration he has to manage a very different disease from ordinary insanity. Dr. Parchappe* ranks all cases presenting this mental condition with simple insanity, and considers them as cases of purely *dynamic* or functional disorder, while he attributes the *plastic* or organic character to those cases only which present the complication of general paralysis. Cases are, however, frequently met with, sometimes under the form of ambitious mania, sometimes under that of melancholia or hypochondriasis, presenting the condition of mental impairment which has been described above, but without the slightest symptom of paralysis, which, on account of their incurable character, or their speedily fatal termination, it is of the utmost importance, in a practical point of view, to distinguish from simple insanity. Dr. Guislain (*sur les Phrenopathies*, vol. 1, p. 368.) has spoken of the difficulty of dis-

* *Annales Médico-Psychologiques*, vol. 4, p. 475.

tinguishing insanity accompanied with cerebral congestion, during its early stages, from the simple uncomplicated form of the disease. "The conditions," says he, "which excite the fears of the physician, are the persistence and increase of the mental disorder, the complete absence of moments of calmness and rationality, the appearance of acute symptoms in a case which has become chronic, confusion and incoherence of ideas, accompanied with feebleness of conception and memory, spreading itself like a veil over all the perceptions. * * You may suspect its existence if, from the origin of the malady, you observe violent passions in connection with great disturbance in the domain of thought, and if you observe ideas which recall a state of marked intoxication, if from the beginning the conversation is incoherent, if the words have neither order nor connexion, and if there is exaggeration, existing at the same time with enfeeblement of thought, if the answers of the patient bear the impress of extravagance, if he boasts with a puerile air of his bravery, his wealth or his intellect." This author remarks that as long as the ideas are clear, however extravagant they may be, there is no reason to fear cerebral congestion. It is not to be suspected in simple insanity, or in cases where an exaltation of the passions or emotions, or even an unaccustomed impulse of the will characterizes the disease, nor in any other form of insanity which does not present indications of decided intellectual impairment. He speaks of emaciation, muscular rigidity, involuntary evacuations, convulsions and paralysis, as diagnostic signs of this complication. When the congestion produces effusion between the membranes, "the symptoms," says he, "are sometimes truly alarming. They consist of a sudden change in the mental and physical condition of the patient. Sometimes a state of coma is followed by a notable loss in the sum of the intellectual acts, in other cases there is incomplete hemiplegia, muscular contractions, jerkings or general convulsions, followed by complete suspension of all the sensorial acts."

The above symptoms when fully developed will leave no room for doubt as to the nature of the disease, as distinguished from simple insanity. During its forming stage, before the certain indications of

congestion have made their appearance, the existence of such evidences of intellectual impairment as have been described, will put the physician on his guard against deciding too hastily as to the harmless nature of the malady. From general paralysis, it may be known by the absence of all symptoms of paralysis, except such as are only occasional and temporary, very partial in their extent and so slight as scarcely to attract notice. In that disease, the paralysis, though slight in the beginning, is manifested in all parts of the muscular system, is constantly progressive, and at length, both in extent and severity, comes to be the most striking feature of the disease.

That there is a very strong relationship between congestive mania and general paralysis, is fully attested by the resemblance of the mental disorder, and the identity of causes which produce the two forms; and if it were possible for paralytic insanity to exist without paralysis, we might feel tempted to refer both classes of cases to that affection as to an admitted and well established form of cerebral disease. There is indeed strong ground for believing them to be identical in their nature, and that consequently the paralysis is not an essential feature, but only a complication or one of the modes of termination of the disease. Dr. Parchappe, it is true, classes all cases such as I have been describing with simple insanity, under the head of purely functional disorder, and makes them essentially distinct from cases of general paralysis, which he considers as dependent upon a structural, organic change of the cerebral tissue. I believe, however, that softening, such as has been observed in the cortical substance of the brain, to which he attributes paralytic insanity, is far from being admitted by pathologists as a primary, idiopathic affection. If this softening is not entitled to be so regarded, the paralytic symptoms can not be properly referred to it as their cause, but to some anterior, morbid action of which it is the result. Dr. Calmeil* considers this morbid action to be inflammatory in its nature, and has given it the name of chronic diffused peri-encephalitis. The same author describes cases of the acute cerebral affection, which

* *Traité des maladies inflam du cerveau*, vol. 1, p. 261.

has been already mentioned under the name of acute delirium, as acute peri-encephalitis under the insidious form. The resemblance of congestive mania to that affection has already been spoken of, and it appears to me that it occupies the position of a connecting link between the acute and chronic forms of the same cerebral disease, viz, a congestive or inflammatory affection of the cortical cerebral substance, in its most acute form, running a rapid course, and generally terminating fatally from the eighth to the fourteenth day, sometimes in its milder forms ending in apparent recovery, but frequently passing into the variety of chronic mania which I have been engaged in describing, and sometimes ending in general paralysis. All may not be agreed upon the inflammatory nature of the affection, but the fact that it is constantly accompanied with cerebral congestion, will perhaps not be denied by any one, and the word *congestive*, expressing this fact, though possibly not fully indicating the nature of the disease, appears to me to be highly appropriate, as well as convenient, for designating those cases in which the paralytic symptoms are absent. It has been proposed for this purpose by Dr. Baillarger, in whose opinion this form of mania frequently terminates in paralytic dementia, to which it bears the same relation that simple mania does to simple dementia.

CASES OF HYSTERIA AND HYSTEROMANIA.

Perhaps there is no term in common medical phraseology to which so loose and indefinite a meaning is attached, as that of hysteria. In the diseases of females, any morbid sensation which is not directly connected with some of the more positive forms of disease, any singular spasm or convulsion, any exhibition of fancy or emotion for which the experience of the practitioner has no counterpart, indeed, every thing by which he is puzzled without being alarmed, is referred to this condition. The popular use of the term, which is

mostly in the form of a qualifying word, hysterical, is, if possible, still more vague. Among the sex to which the disorder is mainly confined the name implies a voluntary state of deception, egotism, immodesty and, more or less, of unchastity, and calls forth the strongest feelings of aversion and reprobation; much the same notion prevails among the opposite sex, but the feeling excited is rather that of pity or contempt than of blame.

If the definitions of hysteria by medical writers have been less ambiguous than those implied in the use of the word by practitioners and non-professional persons, they have been scarcely more harmonious. Nearly all now agree in classing hysteria among the neuroses, or diseases of innervation. But whether it is to be ranked among disorders of the cerebral or of the spinal system, or whether it is really a cerebro-spinal disorder, is by no means settled. To make its pathology purely cerebral is to confuse it with insanity, or, on the theory of deception or feigning, to give it a voluntary character and thus confound it with the forms of vice. Its most striking, if not its most distinctive manifestations are also connected with the spinal system. Probably the preponderance of medical authority is in favor of ranking hysteria as a disorder of the spinal centres. But this, we imagine, has been found unsatisfactory by the practical student, just in proportion as his experience of hysterical cases has been extensive. The perversion of sentiment and the impairment of volition which he learns to trace through the earliest stages of the disorder, the moral and not unfrequently the intellectual derangement, which become more and more recognized as underlying all its other symptoms, and, especially, the immensely greater value of moral means than any or all others in its treatment, forbid him to accept the theory of spinal pathology for the disorder. That derangement of function in both the cerebral and spinal portions of the nervous system, is included in the notion of hysteria by many approved writers, as well as in the common mind, is certain, and this theory seems to us most in accordance with the facts.

These different views of the pathology of hysteria have, of course, varied its definitions. Dr. Copland (*Dictionary of Medicine*, article *Hysteria*) gives the following:—

"Nervous disorder, often assuming the most varied forms, but commonly presenting a paroxysmal character; the attacks usually commencing with a flow of limpid urine, with uneasiness or irregular motions, and rumbling noises in the left iliac region, or the sensation of a ball rising upwards to the throat, frequently attended by a feeling of suffocation, and sometimes with convulsions, chiefly affecting females from the period of puberty to the decline of life, and principally those possessing great susceptibility of the nervous system."

Dr. Carter, in a monograph upon this disease,* also makes the spinal symptoms characteristic of hysteria, and refers to those of cerebral origin as complications of the simple type of the disorder. His definition is as follows:—

"By hysteria, then, is intended a disease which commences with a convulsive paroxysm, of the kind commonly called 'hysterical.' This paroxysm is witnessed under various aspects, and in various degrees of severity, being limited, in some cases, to a short attack of laughter or sobbing; and in others, producing very energetic involuntary movements, maintained during a considerable time, and occasionally terminating in a period of catalepsy or coma. The diagnosis (in so far as rules for it can be written down,) rests mainly upon the absence of epileptic characteristics, and the existence of some evident exciting cause, such as sudden fright, disappointment, or anger. In a large number of cases, the 'fit' thus produced will not return; but when it does so, the exciting cause of the next two or three attacks is often obscure, and then, after a while, the convulsions occur frequently, when no reason whatever can be assigned for their commencement; although, if the patient be vexed or thwarted, they are pretty sure to follow. This state, which may be called *simple* hysteria, and consists in the liability to fits of greater or less severity, either with or without distinct intervals of remission and perfect health, is subject to many complications, which constitute the various disorders known as hysterical spine, hysterical knee, hysterical neuralgia, &c., and may be classified in a way to be considered hereafter. *Complicated* hysteria generally involves much moral and intellectual, as well as physical, derangement, and when it is fully established, the primary convulsion, the '*fons et origo mali*,' is sometimes suffered to fall into abeyance, and is lost sight of and forgotten by the friends of the patient, their attention being arrested by the urgency of new maladies. But an endeavor will be made to show, that this convulsive paroxysm is the essential characteristic of the disease; and that all other phenomena manifested during its

* *On the Pathology and Treatment of Hysteria*, pp. 2-4.

course, are non-essential and secondary; so that the reader is requested to postulate thus much, until he has concluded his perusal; and to dismiss for a time the recollection of all cases, professedly hysterical, which have not had their commencement in the manner indicated above."

Much has been done to render medical science more simple and precise, in the withdrawal from several classes of disease, which embraced a large number of diverse and obscure symptoms, of special groups of these, dependent upon some pathological or other proximate cause, whence they might be appropriately named. Thus in the progress of science, from the hypothetical disease insanity have been taken the better defined maladies, of mania *â potu*, general paralysis, and softening of the brain. If there have also been added to insanity a number of special varieties, each representing a single form of moral perversion, this error in classification is likely to be soon abandoned. The same is true of epilepsy, which remains an ideal type of disease, while epileptiform convulsions, frequently found to be dependent upon certain cerebral lesions, toxic agents, or points of irritation, in numerous instances are not included under this name. It would seem expedient to follow a similar method in treating of hysteria, and it is a matter of surprise that this has not already been done. We would thus denote by the name hysteria, a disorder marked not only by great nervous excitability, shown in spasm or convulsion, but also a perversion of the emotional nature, with more or less impairment of the voluntary powers. Simple convulsion, even of the kind most common in hysteria, would not then be termed hysterical, unless connected with moral or volitional disturbance, and no disorder of the cerebral functions would be classed under this head, unless conjoined with a morbid state of the spinal nervous system. Thus, in a case of hysteriform convulsions following some sudden sensation, or some new and entirely unsolicited emotion—the primary hysteria of many writers—we would not admit the term. If this exclusion were general, many chaste and right-minded women, who chance to have suffered a peculiar form of convulsion, would escape an unjust imputation; while in many others, whose nervous functions were unimpaired, might be recognized the premonitions of insanity

or the proofs of a vicious nature, both of which are too often passed by under the disguise of an unmeaning term. In the so-called secondary hysteria, following upon emotions voluntarily preferred, or upon the spontaneous recurrence of those before indulged, or from sympathy with morbid emotions in others, the disorder should alone be recognized.

By hysteromania we do not mean a condition of "moral insanity," marked by "irresistible impulses" to the intensest egotism, to mendacity, and sexual gratification, but a true mania, developed upon a state of hysteria, to which it bears the same relation that mania *à potu* does to habitual drunkenness, the "oinomania" of certain writers. In confirmed inebriety, as in hysteria, there is a morbidly powerful passion, with which a correspondingly weakened volition has to contend. But principles of conscious right and of the soundest policy, hold the individual responsible for the actions which follow. The first stimulus to the growth of the passion in each case, was, or must be presumed to have been, voluntarily applied, and the loss of the determining power of the will can only be proved by positive symptoms of cerebral disorder. This will no doubt be more readily assented to in reference to drunkenness than to hysteria. In those rare cases of drunkenness, resembling most closely paroxysms of mania, the gratification to be obtained is one in some degree conceivable by nearly all who are called to pass upon the responsibility of the subject. But in the worst forms of hysteria the desire from which all the almost supernatural efforts flow, is utterly foreign and incomprehensible to the common mind.

The limits of hysteria and hysteromania are then to be determined, as in deciding between confirmed inebriety and mania *à potu*, by the presence or absence of actual lesion of the mental faculties, implying a coercion, not a surrender or a depravation of the will. By this criterion, the case now to be detailed will be set down as one of hysteria. The line of irresponsibility was no doubt closely approximated in the prolonged excitement which ended upon admission to the Asylum. It may, we think, be fairly doubted whether, after the surrender to the control of her jealous passion at the news of her

brother's marriage, and after the loss of sleep and the physical exhaustion which followed, there remained the power of a voluntary termination of the paroxysm. Certainly the drunkard can not voluntarily free himself from a fit of intoxication, yet he is held responsible in a condition which he has freely brought on. The nervous symptoms above detailed,—the tremor, the hyperæsthesia of the skin and the convulsions—were, it is evident, almost purely involuntary, as presented while at the Asylum; though we must suppose that they were in part simulated at an early period of the attack.

B., an unmarried female, forty-nine years of age, is brought to the Asylum for what is described as an attack of mania, of four weeks duration.

The patient is of a tall, spare figure, stands erect, but her neck seems abruptly bent forward at the shoulders. No other deformity is noticeable, although she has slight lateral curvature of the spine. She has strongly marked features, indicating a positive character and a good degree of intelligence. Her countenance has a settled expression of pain and dejection, now overlaid with one of stifled passion and excitement. Upon being questioned she makes little reply, but protests against all constraint, and manifests the most vindictive feeling towards her relatives who bring her for treatment.

She is placed at once upon a ward for convalescents, where, for the first few weeks, there is little change in her manner or disposition. During this period she is taciturn, sullen and seclusive, walks about uneasily by herself, and, unless some firmness is used, rejects food, medicine, and necessary repose. From this she slowly changes to a more placable and communicative mood. For some time she shows much bitterness when the subjects of her furious passion are mentioned, but talks freely, especially of her own griefs and ailments, every thing relating to which she describes with great minuteness and accuracy. Her memory is also good in respect to other matters of which she has had a knowledge, and she manifests no delusion or other impairment of intellect. When at length the subjects connected with her recent paroxysm can be cautiously alluded to

without exciting passion, she admits the kind intentions of her friends, and acquits them of every thing which could in any degree justify or explain her excessive resentment.

Her history to the time of her admission to the Asylum is drawn up from her own accounts, and from statements by several members of her family. She has no known hereditary tendency to mental disease, but a marked strumous taint is derived through her parents, both of whom died of phthisis. A brother has the usual symptoms of the same disease in its chronic form, and a sister has long been an invalid, with convulsions said to be epileptic.

The patient was a frail, sickly child, but did not suffer from convulsions, or from any positive form of strumous malady. Not able regularly to attend school, her feebleness was made the excuse for a neglect of any training or study at home. Yet with an active, rather precocious intellect she acquired a good degree of general information, and under her mild, affectionate disposition the lack of proper discipline was not greatly manifested in her early character. At the approach of puberty she began to suffer much from pain in the side, headache, and a dry, teasing cough. The menstrual flow was scanty and irregular from the first. At eighteen years of age she had an attack of hemorrhage, supposed to be from the lungs, and other attacks of the same nature were sustained in the two years following. These aided to reduce her strength, and she was gradually becoming more and more an invalid. With her greater feebleness came an increased nervous susceptibility, and her attention was almost constantly directed to her own morbid sensations. There was thus far, however, nothing in her disposition or temper to lessen or repress the tenderness of her family toward her in her paroxysms of agitation, and under the painful sensations of which she complained. Indeed, all the moral sentiments seemed to be developed in the same ratio with the nervous sensibility. Her manner and conversation indicated the greatest devoutness, humility, self-denial, and resignation under her sufferings. At this time, by considerable reading and a retentive memory, she had become decidedly well-informed, and was considered to have an excellent judgment in business and family affairs.

At the age of twenty-seven, her sensitiveness and prostration had become so excessive that she was wholly confined to her bed. The five years following present us with the history of a most distressing case of acute hysteria, aggravated by the abundant and mistaken sympathy of relatives and friends, and the most ill-judged heroism in the use of remedies by her physicians and others. During this period she rarely made the slightest voluntary use of her limbs, except feebly to move her hands. Sensibility to touch was so exalted over the entire surface of her body, that the lightest bed-clothing could scarcely be endured. Light, sound, quick and sudden movements gave her the acutest pain, and were sufficient at times to excite violent convulsions. She had at irregular intervals, but upon an average about once a fortnight, for the whole of this period, a series of convulsions lasting from one to three hours. These frequently assumed the form of the most violent and dangerous pleurosthotonos, and were excited by sudden sensations of any kind, trifling surprises, disappointments, or fancied unkindness or neglect. In the latter cases, at first the convulsions supervened without any hint in the mental manifestations of the emotion that had induced them. For several years this condition of things was fostered by the minute attention of the family and friends, and the most lavish bestowal of pity and indulgence. But if the moral treatment was calculated to aggravate and prolong this hysteria, the medical treatment was certain to confirm the constitutional vice under which the affection was possible, and which should have been partially removed with the advancing age of the patient. Her case was pronounced one of "spinal irritation." After the more moderate means of alteratives and cathartics had been exhausted, without benefit to the patient, derivatives and depressants were resorted to. And these were certainly pushed with an energy worthy to be allied with greater prudence and discretion. In six weeks eighty-seven blisters, six inches by three in size, were applied along the spinal tract; the first being placed at the neck, and as it was removed another applied just beneath, thus proceeding downwards to the sacrum, and repeating the course again and again. After this followed fifteen applications of

the scarificator and cups, along the same line. The chronic stage of the regular treatment was marked by the free use of setons and tartar-emetic ointment. Large doses of morphine were given from the first, and afterwards increased as it was thought necessary to control the convulsions. Finally, as is usual in such cases, there came the trial of nostrums in endless variety. Among these were the "Gold Pills," five boxes of which, at a cost of ten dollars per box, were used without effect! Then medication was gradually discontinued, and, the attention of friends becoming somewhat wearied and diverted, as the moral element of the patient's disease began to be better comprehended, the acute symptoms slowly abated. For two years longer, however, her habits were those of a complete invalid.

During the seven years thus passed there had been no sudden or radical change in the moral nature of the patient, but it seemed as if a veil were gradually lifted from her character, with the passing away of the acute manifestations. The strong affection for her family, and all the devoutness and humility still remained, but the strange moral perversion which, at first entirely hidden from those who knew her, had in fact underlain all this outward show of bodily disease, now came forth in its mystery and contradiction. In the words of her brother, "she seemed possessed of two minds." She was almost in the same moment, and sometimes to an extreme degree, generous and exacting, meek and imperious, affectionate and vindictive, melted into tears and transported with rage.

For the ten years next following she was able partially to superintend the affairs of the household, which consisted of herself, an unmarried brother and a sister. The nervous manifestations did not amount to more than slight spasms, or convulsive sobbings. Her face constantly wore its expression of great suffering; her ordinary manner was one of forced cheerfulness; her movements were slow and faltering. Her infirmities of temper and disposition became less and less disguised. These were met by her friends with the utmost charity, yet now in a manner not to encourage, if it did not repress their manifestation.

At the end of this period, and when forty-two years of age, the

menstrual function ceased. For six months following the outbreak of hysteria it had not been performed, and very imperfectly since. Latterly she had lost considerable blood from hemorrhoids, and at times this seemed to be vicarious of the other discharge. From this time she grew more gloomy and despondent, and her faultiness of temper became gradually more excessive. She was almost never cheerful, was very hypochondriacal, lost interest in household matters, was more easily excited to passion, and more difficult to appease and control. A marked step in the progress of this change was observed about a year previously to her admission to the Asylum. This is alluded to in a note from her brother as follows:—

"A brother older than myself, who has had the family in charge since our father's death, had made arrangements to marry, and while my two sisters were visiting with me, took his wife to his own home, apart from where the three had lived together for many years. This arrangement involved a decided change, which could not fail to have some effect; but what most disturbed the patient was, that all should have been done without her knowledge or advice. From the hour in which she read our brother's letter, she became implacable, except at intervals of short duration."

So entirely, however, was the change a mere intensification of the mental infirmities developed by the acute attack of hysteria fifteen years previous, that she was not deemed insane until about a month before she was brought for treatment. "I consider her now," writes the brother, "in the same state in which she has been for many years; *only that it has changed from an occasional to a continued matter.*" During the month referred to her excitement was almost constant. She passed many successive nights without sleep, and almost wholly abstained from food. Her feebleness and bodily ailments were forgotten. She was active in her movements, and seemed to have extraordinary powers of effort and endurance. Her face lost its appealing look of pain and dejection, and expressed violent passion and imperious will. It was not her brother only who had wronged her, but every one had turned against her. No explanations, no persuading, rebuking or other moral argument availed any thing. There was no incoherence in her language, and there

were no positive delusions; but her suspicions and beliefs were as extravagant as her fury and vindictiveness were excessive.

We have already noted the appearance of the patient at her admission to the Asylum. The sudden change from all the objects of her morbid passion to an unwonted association with strangers and insane persons, and the strict discipline under which she came, repressed the manifestations at once, and, after a few days of intense agitation beneath an appearance of sullenness and dejection, the paroxysm seemed to be at an end.

From this time forward there was no threatening of a maniacal attack in the patient's case, but the confirmed hysterical affection soon became apparent. Left much to herself at first, she gained the sympathy of some of her fellow-patients, showed a jealousy and hatred of others, and gradually developed all the moral and bodily defects of her former condition.

At the end of three months from her admission, she is confined to her bed, in which she lies bent almost double, and propped up with pillows. She constantly exhibits the greatest distress from pain referred to the whole spinal tract. She has headache, vertigo, and the greatest intolerance of light and sound. The food taken by her in the course of a week does not amount to a single moderate meal. The watch-woman has not detected her sleeping for many nights, and she denies that she sleeps at all. When observed she has constant spasms of the face and arms, and extreme sensitiveness over the whole surface of her body. Upon being touched, or even approached by the finger of another, she shrinks, and complains of pain as of "an electric shock." She is very lachrymose and desponding, but is aroused to reproach bitterly those who do not sufficiently pity her, or who lack entire confidence in her representations. The necessary care of her person is a most tedious and painful process, as she can make only the feeblest exertion, and complains of severe pain at being moved. Her pulse is feeble and rather quick, but not too frequent; tongue clean and natural, bowels regular, skin moist, extremities usually cool. Large doses of morphine and *cannabis indica* have no effect. Stimulants and antispasmodics afford a slight relief.

While in this condition she is, without warning, transferred to another ward, where she is at once dressed, placed in an easy chair upon the common hall, and all manifestation of pity, and all extraordinary attention strictly prohibited. A full diet, and entire disuse of the bed during the day, are gradually enforced. She appeals from this regimen with the most pathetic earnestness at one moment, and in the next gives vent to reproaches and imprecations. At the end of a week, however, she is quiet and lady-like, submits as a matter of course to the regulations, and walks to and from the dining-room without aid. After a few days longer, she busies herself at fancy-work, reads the newspapers, and rides several miles in a carriage.

There is little further change in her condition to the end of a sixteen months' stay in the Asylum. She shows a constant tendency to relapse into acute hysteria, but this is met without difficulty. She can usually talk calmly about herself and her relatives, and at such times expresses the warmest affection for the latter; who, she says, have always treated her most kindly, and have only too much indulged her. The brother's concealment of his intended marriage, she thinks was very ill-advised, but meant only in kindness to her. The paroxysm of excitement she attributes entirely to the shock of the intelligence of his marriage, and not to any feeling that she was wronged by such a step. For her furious threats of violence and incendiarism, she disclaims all consciousness of the slightest responsibility, and asserts that her excitement was entirely involuntary in its origin, and wholly beyond her control. She admits that the regulations enforced in her case are well meant, but insists that they are entirely mistaken. Her memory is still unimpaired, and she gives minute particulars of her personal history for twenty years past, with all the accuracy which we might expect in one who had made her own sensations and desires sole matters of concern for so long a period. She is not at all deficient in judgment upon matters of common interest, and when fully under the proper moral restraint directed for her, there is nothing unusual in her appearance or behavior. At irregular intervals, however, some slight cause, such as the sound

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of a violin, or the half-understood whisper of one to whom she is inimical, is sufficient to throw her into a severe hysterical convulsion. This seems to afford an outlet for her morbid feelings, and apparently less moral force is necessary to restrain them, for a short time afterwards. She leaves the Asylum with many expressions of regard for those with whom she has become acquainted, but at the same time with a rankling animosity to those who have directed her treatment.

The following illustrates the development of hysteromania from a case of hysteria, which was itself the result of a series of paroxysms of acute mania:—

B., an unmarried female, aged 21, a seamstress, the daughter of a farmer, of healthy parents, was brought for the first time to the Asylum, April, 1851, in her eighth paroxysm of mania.

She had been a healthy child, intelligent, and without striking moral or mental characteristics. At the age of 16, immediately succeeding a suppression of the menses brought on by exposure to cold, she had a paroxysm of acute mania. Recovering from this in a few weeks, during the same year she suffered a second attack, and within the next four years six others, varying from three weeks to as many months in duration. These attacks were apparently induced by undue fatigue or unusual excitement, producing loss of sleep. They were marked by excessive emotional disturbance, without controlling or prominent delusions. She was very hilarious, talkative, boisterous and noisy. As one paroxysm succeeded another there came an increased moral perversion, and she gradually became more passionate, capricious, and difficult of care by her friends. In the intervals between the later paroxysms certain moral peculiarities began to be observed. She became sentimental, egotistic, desiring much attention and consideration, and free in her manner toward the opposite sex. The nervous symptoms of progressive hysteria were manifested in a less degree, but were sufficient to characterize the disorder.

She left the Asylum after a period of several months' convalescence from her paroxysm, two years subsequent to admission. Dur-

ing the eighteen months next following she taught a common school for one term, and afterwards conducted a small news and periodical agency. At the end of this time she again became maniacal, and was brought to the Asylum where she again convalesced, and, after six months, returned home.

That so many and so severe paroxysms of mania should occur in the case of a girl within a period of six years, beginning with her sixteenth year, without leaving the most marked mental impairment must greatly surprise any one not accustomed to observe such cases. To those not acquainted with her, the patient in the intervals of her mania presented no lack of intelligence, and no striking singularity of manner; nothing, indeed, which would lead any one to suspect her sanity. But to her friends and relatives there was manifest a decided mental impairment, which was gradually extended by each successive paroxysm of mania. The moral perversion, however, was most noticeable. This had proceeded rapidly, and had effected an entire change in her character. The egotism and the simulative characteristics of hysteria were now very prominent. Just previously to the last attack she had falsely charged a laboring man with having made lewd advances to her, and she had given many other evidences of morbid passion and desire. Her bodily health continued generally excellent, though she emaciated considerably during her paroxysms.

In August, 1859, the patient was again brought to the Asylum, in a paroxysm of mania of ten days' duration. It had come on without any assignable cause, and very suddenly. She had been for the four years since her last convalescence, in her wonted fickle but energetic way, successfully employing herself to gain a livelihood. Her mania was very similar to that of her later previous paroxysms. She talked almost constantly in a very loud tone, with great exaltation and egotism, abusing and denouncing every one about her. Though most passionate and imperious, she was not violent or destructive. The hysterical element was now very conspicuous in her manner and disposition, and it seemed probable that a voluntary surrender of self-control, at the instance of her morbid desires, was

the occasion of her attack. The administration of anodynes was pushed with the view of overcoming this condition, but without effect. Ten grains of extract of *cannabis indica* and half a grain of sulphate of morphia, given four times a day, appeared to have no effect. The substitution for the hemp of one-fourth of a grain of tartrate of antimony was, however, at once effectual. The next day she was entirely convalescent, and showed no symptoms of excitement for several months. She was busy, cheerful, professing the most excellent sentiments, and claiming to herself the most exemplary character. At the same time she was very arrogant, jealous of attention paid to others, immodest and deceitful. One day on its being suggested to her that, as her restoration seemed confirmed, she should now return home, and that arrangements might at once be made to that end, she seemed dissatisfied. On the next day she had relapsed to her former state of exaltation with constant loud and abusive talking, boisterous movements, etc. She was at once transferred to another ward, where the paroxysm soon subsided. At the coming on of spring she expressed a wish to return home, and soon afterwards left the Asylum, in a state of intense good feeling with herself and most of those with whom she had associated.

It is well worthy of being questioned, whether, in treating of the causes of hysteria, too much has not been attributed to the morbid action of the reproductive instincts. Until within a recent period the disorder has been generally stated to be, as its name imports, one of uterine origin, and an eminent American writer* defines it to be "an abnormal state of the aphrodisiac sense." Upon the theory that it is in part truly a cerebral disorder, we may often trace it to a purely moral origin, and do not feel obliged to suppose the existence of morbid sexual instinct where none is exhibited. The following case of undoubted hysteria, in one so young as not to have given the slightest indications of approaching puberty, is interesting:—

J., a girl ten years of age, not well-grown, evidently of a strumous habit, and in delicate health, is brought to the Asylum, in July, 1860.

* Dr. Meigs.

She appears active and intelligent, and in no way singular, except in a certain "nervousness," among other marks of precocity.

Upon being told to what place she has come, and that she will remain for treatment, she bursts into frantic grief. Placed upon a convalescent ward, in a few minutes she becomes quiet and cheerful. During two months afterward, to the time of the present writing, no symptoms of mental or nervous disorder are noticed. She has slept quietly and well from the first, has gained a hearty appetite, and has grown in flesh and stature. She is rather talkative and inquisitive, quickly apprehending the spirit and discipline of the ward, but is decidedly childish, both in intellect and sentiment. Nothing hysterical has been observed, except an earnest desire for notice, and a slight morbid self-consciousness.

Her friends and the family physician give the history of her late illness. One year ago she was attacked with scarlatina of a malignant type, by which she was greatly prostrated. Following this, she suffered a series of violent convulsions, lasting several hours, and leaving her partially comatose and with paralysis of the left side. The coma and hemiplegia gradually passed off within a week. Profuse hemorrhage from the gums and fauces, was also among the sequelæ of the scarlatina, and came on after hysteriform spasms of the muscles of the neck and throat, with severe choking and difficult respiration. At this time the first indications of mental disorder were noticed. She was at times confused, partially delirious for a few moments, greatly terrified at some imaginary danger, at night awakened by frightful dreams, or found walking about the house in her sleep.

At the end of three months these symptoms had somewhat abated, when she was attacked with diphtheria, again greatly reduced, and afterward the hemorrhage, the convulsions, and the temporary coma and paralysis repeated. The convulsions now became more frequent and violent. They lasted from three to six hours, during which she seemed entirely unconscious, her eyes suffused and congested, her face deeply flushed, and blood and foam issuing from her mouth. Constant spasm of the left side at first, was followed by a temporary

paralysis as before. At times the convulsions were very severe and general, and attended with alarming symptoms of suffocation. Ether was given at these periods, and the convulsions for the time subdued. *Cannabis indica*, the valerianate of ammonia and other remedies were directed against the nervous disorder. Quinine and iron were freely given, and topical applications used to control the hemorrhage.

Three months previously to her admission to the Asylum, the mental disorder had become quite marked and afterward steadily increased. She became very timid, and apprehensive; feared being sent to jail and various other punishments. Fancying herself a beast or bird, she would crawl about the floor, striking persons and directing them to go away from her. Her somnambulism came on nightly, and she was seldom quiet for more than a few moments. At times she could not be aroused from this condition. Her temper was extremely variable. When in an amiable and affectionate mood, she would become suddenly angry and vindictive, profane and indecent in her language, and violent towards all who opposed her. Her appetite was very small and capricious, yet she did not become greatly emaciated. She came quietly to the Asylum, under the deceptive promise of a short ride and a visit to a relative.

Similar to the above, in the youth of the subject, and in the absence of any probable relations with the sexual instincts, is the following case:—

S., twelve years of age, a well grown and intelligent looking boy, precocious and sensitive in manner, pale and apparently not in good health, is brought to the Asylum, in January, 1859.

The patient was a puny child, and, suffering considerably from febrile attacks, remained in delicate health. He was an affectionate and good tempered lad, but had no proper training, and grew more and more wayward and difficult of control. At the age of seven he was first sent to school, but objected to study and discipline, and went very irregularly. Three years later, he went with his mother to California, where they remained a year. Here he fell in with rude and depraved boys, with whom he spent most of his time in the

streets. Weak and ill directed efforts were made to control him, and to keep him at school, but with only the effect to make him more deceitful and vicious.

At about this period he began occasionally, during the daytime, to fall suddenly into what seemed a profound sleep, from which he could not be easily aroused. By degrees these attacks became complicated with spasms, convulsions, and finally with delirium and hallucinations. He would tear clothing, strike those who came near him, and be very abusive, profane and obscene. At times he would seem to be resisting some attack, and in great apparent distress. Again he would imitate movements in driving horses and other favorite pursuits.

A week before his admission to the Asylum he had a series of severe convulsions, during which he seemed entirely unconscious. The paroxysm was marked by all the characteristic symptoms of hysteria, the violent convulsive movements, the spasms, and the peculiar sobbing and choking. Following this he was apparently delirious, and raved of spirits and other unseen agencies. A degree of excitement and of irrational conversation and behavior had been noticed at times, for several months previous to this attack, and had gradually become more marked. His usual manner had also become more singular, and he was very capricious, deceptive, perverse, and quite ungovernable.

He was much distressed at being brought to the Asylum, and for a day or two was very sad, careful and proper in his behavior, and yielding at once to the discipline of a convalescent ward. On the third day he confessed to his physician that his convulsions and other symptoms had been feigned, at first to escape from school, and finally to obtain his wishes in other respects. He says that he was always conscious during the attacks, and could have terminated them at any time had he been so disposed. He is fearful, however, that they will at length get beyond his control, and that he shall become really insane. Exhibiting great penitence, and promising most earnestly to reform his conduct, he is encouraged by being allowed much liberty, and by various amusements and occupations being provided for him.

During the two months of his stay at the Asylum he exhibits no symptoms of nervous disorder, or of morbid excitement, and constantly gains in general health. He is active, inquisitive, fond of the company of those older than himself, at times willful and passionate, but yielding readily to control.

According to advice, on leaving the Asylum he is placed at a small boarding-school, under the charge of an excellent and experienced master, where he still remains. At the end of a year, he visits the Asylum with the best feelings toward those who had him in charge. He has grown finely, is stout and ruddy, and gives no trouble on account of morbid or vicious propensities.

The deplorable folly of the use of depressing means in cases of spinal irritation and hysteria, in both of which the essential condition is debility, although it is rebuked in all the best standards of practice, can not be too often pointed out. So far as we have any knowledge, every medical agent employed in the first case presented here was directly calculated to aggravate, and to fix upon the patient the disorder at which it was aimed. The third case, in which the medical treatment was wholly tonic, and for some time persisted in by an intelligent practitioner, indicates the slight advantage which is to be hoped for from medical agents of any kind in hysterical disorder. It is no doubt true generally that, in the early stages of hysteria, certain classes of medicinal agents, such as tonics and antispasmodics, are useful adjuvants in the treatment. But in a case of progressive hysteria, the period in which these or any other drugs may be used with advantage, is very brief, and they quickly become not only useless but positively deleterious. As soon as the simulative element of the disorder is developed in the least degree, any prominence given to medical treatment is availed of at once to strengthen a system of deception and feigning. More perhaps than in any other disorder is seen the positive evil of the free use of drugs, and more than in any other the benefits of moral treatment. Now in hysteria, as we have defined and limited it, there is no exception to this theory of treatment. From the period when the deceptive element of the

disorder has not gone, it may be beyond a state of self-deception, and when the patient honestly protests against the view taken of her case, to that of the most deliberate vicious manifestations, or those which usher in a maniacal paroxysm, the constraint of moral motives, the opposites of those characteristic of the disorder, is the great and almost the only remedial means.

In this connection we may allude to the inconsistencies in its practical application involved in the hypothesis of "moral insanity." The student will be surprised to find the numerous instances in which various forms of this proposed disease have been illustrated from cases of hysterical women. When, however, no symptoms of hysteria are present in these illustrative cases, we recognize the fact that a cure is to be sought in the provision of powerful motives to repress the tendency to dangerous or criminal acts. The advocates of a moral insanity by no means deny, in the light of all experience, that the practical treatment of emotional and voluntary impairment consists in discipline, and in discipline almost alone. They are also foremost in urging, what modern science is forced to admit, that all the penalties of human law have rightfully a corrective, and not at all a retributive basis. What then the need of a "moral insanity"? The manifestations are the same, the treatment and its principles are the same, as in vicious and criminal cases. But, more than this, we have a practicable point of departure for our line between sin and disease, in this very matter of treatment. Cases of vice are cured by discipline; those of insanity are not. There are, of course, many instances, in which it is difficult, before the opportunity of treatment, to determine the nature of the case, and some, indeed, in which it must finally be left undecided. But this is a most useful, and, we believe, the best possible method of arriving at the truth. We ask again: If the proper means for the repression of vice are only disciplinary; if discipline be the great remedy for a moral insanity, which is only distinguished by vicious manifestations; if insanity does not necessarily imply vicious acts, and if discipline is not a principal and essential agent in its treatment,—what can justify us in the use of a vague and perplexing term?

Admitting then that moral treatment in hysteria is of the first and almost of sole importance; that deceit, whether it be self-deception or deliberate imposture, is to be met with candor, and sentiment with matter of fact; that passion is to be confronted with calmness and want of self-control with authority;—the question arises, under what circumstances this treatment is to be conducted. The condition most essential to be gained, it will at once be admitted by those who have any experience in the matter, is a complete separation of the patient from her home and friends. This can not be too strongly urged by the physician, who, although this advice may lose him a patient, will otherwise too often be obliged to witness her removal to a "water-cure" or a "medical institute." The institution or other place of treatment to which the patient should be removed, must be determined only by the symptoms of the disorder in each case. In many, a simple change of scene and of attendance only is required. Severe cases, as they occur among the poor of our cities, are treated in the general hospitals, where, however, they seldom reach any permanent improvement. On this point Dr. Carter* writes:—

"But little argument is required, to show that hysteria cannot be cured, except by accident, in an ordinary hospital. It is very true that some individual complication may be broken through, that a contracted joint may yield to the cold douche, or that a convulsive paroxysm may for a time be prevented from appearing; but the principles and motives of the patient remain unchanged, and there is no machinery which can be brought to bear upon them. It has been already stated, that of the fifty-three cases mentioned in the register of the London Hospital, only twenty-three are said to have been cured, and that of these cured patients, one was twice re-admitted within three months of her first discharge. The record is also remarkable, as showing the short period during which hysterical women are kept under treatment, this often not exceeding a few days, and being a tacit confession that nothing could there be done for them. And if the internal economy of a hospital be considered, it is seen to furnish conditions more likely to develop the disease than to repress it. The publicity of a ward furnishes abundant opportunities for display, the neighboring patients are often good listeners, and lavish of their sympathy; and the frequent presence of numerous students must not be altogether left out of the account.

* *On the Pathology and Treatment of Hysteria*, pp. 157-8.

"The home of an hysterical girl can scarcely ever be the scene of her cure, for reasons which it is unnecessary to repeat, and it must, almost of necessity, retard the progress of her recovery. This being the case, and the method of treatment which has been described being utterly out of the reach of the poor, it follows that great benefits might reasonably be expected from the formation of a special institution, in which this method, with the variations suggested by experience, might be thoroughly carried out, and in which accurate and careful research might be made, into the exact nature of many obscure and highly-interesting phenomena, of which nothing is well ascertained but their occurrence."

The author above quoted proceeds to recommend the foundation of special hospitals for the treatment of hysteria, and gives the outline of a plan of organization and treatment. The project appears to us much more practicable and promising of good results than that of inebriate asylums, which is now receiving so much attention.

The cases which we have detailed, in which mania was in some degree simulated or yielded to (in the second by one laboring under positive mental impairment, and thence properly a case of mania,) are presented rather from their singularity than as representative cases of the class committed to asylums for the insane. The most untractable cases of every variety, occurring in the lower and middle classes of society, are treated chiefly in public institutions for the insane, and, we have no doubt, with better results than in any other way. Private asylums are also much resorted to by the wealthier classes for the same treatment. The expediency of such a course in regard to these cases, we should suppose might be inferred by any one acquainted with the organization of lunatic asylums and the common manifestations of hysteria, even without any practical knowledge of the subject. We are, therefore, surprised to find that Dr. Dunglison,* in cautioning against treating cases of hysteria as those of simple mania, and placing the patient "in confinement with lunatics," writes as follows :—

"Nothing more likely to have the most unfortunate effects upon the patient could possibly happen, and no care can be too great to

* *Medical Dictionary*; article *Hysteria*.

avoid a mistake which would in all probability render such a case miserable and hopeless."

The treatment directed to the motives in a case of hysteria would indeed have no effect in one of acute mania, and we have already referred to this fact as a ground of distinction in doubtful cases of these disorders. The medical treatment demanded in a case of mania is worse than useless in one of hysteria. But the notion that danger is to be apprehended from an attempt to supply motives to candor and self-control, by associating cases of hysteria with those of the different forms of insanity, as classified in a lunatic asylum, is quite unworthy of serious contradiction.

The following case of hysteria simulating mania, has some points of medical interest, and serves, with the preceding ones, to illustrate the good effects of the moral restraint of an asylum in hysterical disorder:—

B., a girl fifteen years of age, of lymphatic temperament, with slight marks of the strumous diathesis, large and symmetrical in form, and apparently in good general health, is brought to the Asylum, May, 1860.

Her countenance indicates fair intelligence, her dress is neat, her manner calm, but affected and self-conscious. She is said to have been maniacal for a period of nearly three months, during which she has also been deaf, and only communicated with by writing. On being asked a question in this manner, she catches its meaning from the first two or three words, and responds with a silly ejaculation.

On inquiry it is found that the patient was a stout healthy child, and passed the period of puberty at the age of 12, without unusual symptoms. Her intellect was rather precocious, and she quickly acquired the rudiments of a common education. Her disposition is said to have been amiable, and her manner not particularly free or otherwise peculiar.

Two years before her illness, she became greatly addicted to novel reading, and continued it much to the neglect of her school and housework duties. All the romances that her indulgent friends and a village circulating library could afford, she greedily devoured, and

also read, as it was casually discovered, the lewder portions of the standard poets and dramatists.

During the summer and autumn previous to her illness in the winter, she frequently complained of severe headache. She had become very stout and fat, her complexion florid, and she was subject at times to congestive attacks of the head and face. There was no disorder of the menstrual function.

Three months before coming to the Asylum, she was exposed, while menstruating, to severe fatigue and cold, when absent from home, and the function was suddenly suppressed. On the following night she was alarmed at noises of rats in her chamber. These were exaggerated by her fancy, and finally became mingled with hallucinations of fire-bells, explosions, &c. She passed a sleepless night, and the next day set out on foot for home, a distance of several miles, in a violent snow-storm. On the way the sensations in her head grew more painful, she became confused, and at length discovered that she could only hear loud noises. Arriving at home, she fainted at the door. She had all night excessive nausea and a burning face, complained greatly of "a wheel in her head," and was partially delirious. The family physician, a respectable practitioner, was called next day. His account of the case at this time is as follows:—

"I found her laboring under a congestion of the lungs, together with inflammation of the brain and loss of hearing. After a few days treatment the lungs were relieved, the difficulty of the brain still remaining; with also an inability of raising her head while in the erect posture, apparently having no control over the muscles of the neck. About ten days from her first attack she became deranged, and remained so (as well as deaf) until about March 1st, when suddenly she could hear quite distinctly, and talked rationally for about ten minutes. At the end of this period she fell back into her previous condition, and remained so up to the time of her leaving for your place."

In addition to the above it should be stated, that the patient had very frequent and severe hysteriform convulsions within the first two weeks of her illness, and during this time she was actively treated for "inflammation of the brain and congestion of the lungs," by being salivated, purged, cupped, etc., *secundum artem*. At the end

of this time the quasi inflammatory symptoms abated, but upon her enfeebled strength and the predisposition of her faulty training, hysteria naturally followed. During the next two and a half months she exhibited all the usual characteristics of a case of aggravated hysteria. From a partial deafness, consequent upon cerebral congestion, she gradually came to simulate an entire inability to hear the loudest sounds. She was very cunning and deceitful, violent when opposed, noisy and boisterous when most observed, exacting constant attention, mischievous and lascivious. The family and friends were entirely deceived in regard to her, and she became the centre of a morbid interest for a large neighborhood.

On the night following her admission to the Asylum, she called to the watch-woman, saying that her hearing had returned, and enquiring where she was. On being told she expressed little surprise, said that she supposed she must have been crazy, and was glad that her right mind had returned. She complained of unpleasant sensations in her head for a week or two, but these did not prevent her constant reading of romances when this test was applied. At the end of this time she had a series of very severe hysterical convulsions, which she did not afterwards find it necessary to repeat; and, during her stay of ten weeks in the Asylum, she presented no further sign of mental or sensory impairment.

Having illustrated, we are aware in how desultory and imperfect a manner, the interesting subject of hysteria in its origin, its pathology and treatment, there still remains to notice its legal relations. These have received little attention from writers upon legal medicine, and deserve a thorough discussion at the hands of one competent to treat so difficult a subject. Such a task can not even be attempted here, and we shall instead copy,* in closing this article, the remarks of two of the most eminent medico-legal authorities of the present time, upon a case in point:—

“Very recently the question has been raised in France of the criminal responsibility of persons subject to attacks of hysteria. A girl

* *Journal of Psychological Medicine*, April, 1860.

had been guilty of child-stealing, in order to impose upon a former lover the belief that she had been pregnant by him. In her defence it was pleaded that her moral liberty had been weakened from her being a subject of hysteria, and on this ground she was acquitted. Dr. Legrand du Saulle discusses and disputes the legitimacy of this decision. He asks, Does hysteria fetter the moral liberty? Does an affection which has its source in a particular sensibility of the nervous system, and not in mental disease, exclude culpability, and transform a crime into a simple fault (*délit*)? To these questions he answers as follows:—*

‘It is evident that hysteria may well shake a little the edifice of our faculties, properly so called; but in order that no one may consider this an equivocal expression, we ought in the first place to define what we understand by faculties, and to show what is the order of faculties, the exercise of which is liable to be disturbed by the malady in question. Well, then, looking at man from the physiological and psychical points of view, we see that he is the subject of two orders of faculties—the *affective* faculties and the *intellectual* faculties. To the affective faculties belong the phenomena which express a love, a propensity, for certain things, and a hatred, a repulsion, for certain others. To surrender oneself to the affective faculties, being otherwise of sound mind, is to defer to the impulses of the passions; it is to subordinate the actions of life willingly and knowingly to the satisfaction of the desires.

To the intellectual faculties appertains the gift of enlightening the determinations of the will, and making apparent the conformity or disparity of our actions with the precepts of morality. By the aid of judgment, based on observation and experience, they discover also the consequences of each action.

‘From a consideration of the phenomena of hysteria, it may be concluded that this affection might forcibly re-act upon the affective faculties, and in the end might conduce to their injury, but that the intellectual faculties would ordinarily remain intact, the reason assisting in the ruin of the heart, but surviving it.

‘The first degree of affective disorder results from the *passions*, the second from insanity. The passions alone being in question in the consideration of hysteria, and the *affectivity* being only obliterated in the first degree by this malady, we need not occupy ourselves with insanity, to which hysteria only leads in prodigiously rare exceptions.

‘But if the passions leave to the law full liberty of action in the matter of repression, it is not the less true that they are a very frequent cause of extenuated responsibility, and in certain cases familiar to all, of absolute exoneration from all penalty—as, for example, in

* *Annales Médico-Psychologiques*, Jan., 1860.

the case of the murder of a wife found in flagrant adultery in the conjugal dwelling; or again, where it concerns the crime of castration immediately provoked by a violent outrage upon modesty.

'As no one could promise for himself that at any given moment he would have power to master one of those impetuous motions of the mind under the instantaneous influence of which an action is committed, justice, before applying the rigour of the law, is accustomed to inquire whether at the moment of action there was not a partial eclipse of reason, and if such be the case, she allows the accused the benefit of extenuating circumstances. The culpability is lessened, and the punishment also.

'According to the intensity of the hysteria, and the more or less marked perversion, concomitant or consecutive, of the affective faculties, there ought, we think, to be responsibility or extenuated responsibility, but never, or almost never, should total irresponsibility be allowed for this cause.'

"From these considerations it follows:—That in hysteria the affective faculties are disordered in various degrees, but the intellect almost always remains intact. That an hysterical condition of weak or even medium intensity, interfering in no way with the perception of the quality of actions committed, it ought not to constitute a title to the indulgence of a tribunal. That hysteria, raised to a high pitch of intensity, carries with it extenuation of responsibility, and consequently of penalty."

EDGAR ALLAN POE. BY HENRY MAUDSLEY, M. D., Medical Superintendent of the Manchester Royal Lunatic Hospital.

[*From the Journal of Mental Science, April, 1860.*]

"Given a force acted upon by certain other forces, and the result is as good as mathematically sure. Men, like trees, grow according to their nature and their circumstances. . . . Freewill is only force, and all force is determined, first automatically, that is by its own law or nature, and again by the action of other forces."—*Infanti Perduti, Edinburgh Essays.*

"All force in action is what we call free, but all force must be determined to action which is what we call necessity—A man does not stand distinct from nature but in it: the force which his will represents comes not entirely from without, nor is it generated solely within; it is the result of the action of a certain organization upon outer forces, a development of force into a higher manifestation according to fundamental laws of the universe."

It seems as though a man were necessitated for all eternity to say what has been over and over again said, if so be that he will not

keep his mouth shut. There may be some consolation, however, in this sameness of wisdom, if we remember that the thing spoken must be wisdom in order to last; for a lie cannot bear repetition so often, but must by the very nature of it, sooner or later come across those everlasting laws by which it is surely crushed out and dies. The grievous part of the matter is, that the truth so commonly remains but an uttered word, and cannot be made available in the way of practical wisdom: lamentably men will act lies and talk wisdom. There are certain general principles which no one cavils at, which rather every one applauds, so long as they remain general and on the shelf; but if any one take them down and apply them to the concrete individual, he is sure to cause dissatisfaction, and to meet with opposition. Never, perhaps, do we find more frequent and marked illustrations of this than in the determination of the important problem as to what is rightly to be expected from a man in the universe. It may admit, indeed, of question, whether the world's judgment of a man is not mostly very erroneous; perhaps in the majority of cases not really relevant to him. The thing judged is not the feeble being such as he actually was, struggling with weakness in the midst of the irresistible, gasping painfully after development in untoward circumstances—such as he alone of mortals could feel how untoward—but a creation on the part of the censorious and complacent world; such an one as it assumes according to its standard of judgment to have been then and there struggling. There is a wonderful constructive faculty, as well as a destructive faculty in criticism, whereby it happens that a man is often built up in order to be knocked down. The enlightened critic can for the most part see through all the intricacies of human nature as clearly as he can see an elephant in the sunshine, and sends forth his sentence as with the boom of a last judgment. Happily it is after all certain that mighty critics are merely mortals, manifesting in a notable way, now and then, their human littleness; especially when human nature is the subject upon which they exercise their art. Happily again, it is further possible that an unmitigated scoundrel never did actually exist in this world

This is a proposition which is little likely to meet with acceptance

from those complacent, stereotyped individuals, who, dwelling in snug cottage or in stuccoed villa, mightily observant of all respectabilities and conventionalities, gloat over the errors and evils of mankind, fatten on moral putrefaction, as the vulture on the carcass. Oh! the delightful contemplation that the stuccoed man is! Worldly prosperous, with a wife who looks upon him as a hero, considers the stucco to be no mere appearance but actual stone; and happy in children who are the most wonderful children in the world; capable, moreover, of a decided opinion upon all things under heaven; and surely convinced that an Englishman is the beau ideal of the universe, and that he is the beau ideal of an Englishman—what an admirable being! We may be thankful for the stuccoed man. Marvellous truly is it to observe the stoicism of his self-complacency, and the quiet satisfaction which, in an unconscious way, he exhibits, when some considerable misfortune has befallen his friend or acquaintance. He is profuse in commiseration, no doubt, but commiseration is so often nothing but a pleasant chuckle; and the expressions of compassion are manifestly bubbles on the quiet stream of self-satisfaction, which, flowing on, turns the mill of criticism, in which his unfortunate friend is ground down, his folly laid bare, the man reduced to his ultimate elements and these shewn to be rotten. And so onward flows the stream turning many mills in its course, until at length it reaches the ocean of eternity, where, happily, all muddy peculiarities disappear. Useful and necessary being in the world is this stuccoed man; but certainly not the highest possibility of a man; and, therefore, under grievous mistake in supposing himself the legitimate standard of comparison for all mankind.

It is with the man as it is with the house. A cottage ornée is a pleasant sight enough, but a long line of such eligible residences becomes wearisome to the eye, which desires variety of some kind; and one is apt to think that the frequent repetition of the stuccoed villa might be advantageously relieved by an occasional change, even if it were with a pigstye. So also the stuccoed man becomes, in time, exceedingly monotonous; and perhaps it would be well were he to have his portrait painted, and then quietly to make his exit.

In what attitude, in what dress, he should descend to posterity is a question not at once to be settled; but, as being most significant, he might be represented in the act of winding up his watch, with his night-cap on. And in bidding him good-night, there is at any rate to be noted in him this merit—that he has succeeded in feeding himself where brighter men have failed.

To discerning individuals it may sometimes happen to discover in out-of-the-way places, in streets scarcely heard of without a shudder, perhaps in back-attics, or in other such abode not indicating worldly prosperity, men of much originality of character and of wonderful endowments, such as, for the time being, it refreshes one to behold. By the necessity of living they now and then drag in the shafts, but soon kick over the traces, and in fitful gleams of bright originality manifest what they really are, and might, were there favourable possibility, always be—no stucco, unadorned brick and mortar, may-be, or real first-class stone. Alas! originality is a capital thing to starve upon. So these men are compelled unwillingly to yoke themselves in the conventional harness, and to drudge therein, until, broken down by the heavy and unsuitable work, they flare out, often with the aid of brandy and water, into speedy extinction. Have we reason to thank Heaven for such men? Yes, though it be with bitter, sorrowful compassion. For has not one of them now and then spoken a word which has remained to us as an inestimable possession, a *κατῆμα ἐς αἰεὶ* by aid of which the world has been helped forwards towards the unknown goal to which it is advancing. As to their morality, it is better perhaps than to cry out, to recognise this possibility, that the standard by which they can be judged may not yet have been discovered, tabulated, and made available for learned professors of moral philosophy to descant upon. The original man may have a morality of his own, which is just as much a necessary expression of his originality, and a part of his nature, as any great truth which he may utter, or any great deed which he may perform, and which may turn out to be, palpably to the world in the fullness of time, natural and inevitable. Indeed, if we were to reflect upon the matter, it might be difficult to conceive how, if a man have an

intellect of his own, he should not have a practical morality of his own. Suspended judgment is, at any rate, more judicious and more charitable than hasty decision and immediate action thereupon. Now that we have ceased to stone our prophets to death, it might be well to cease also attempting to crush them under a pelting storm of moral maxims. There is not much use in so doing any way; for, though we may contrive to make the mud stick to them for a period, yet time surely washes it away, and the man in the end stands, serene and grand, in the Hall of Heroes; and then we look foolish—little dogs baying at the moon; Lilliputians shooting our arrows into this big Gulliver, making comedy for posterity to laugh at.

It is a conviction not easily resisted at times, that the world must be wrong somehow; that it cannot be altogether right; or we should not surely have so many lunatics, so many too, which is more strange, who have just missed genius and fallen into madness. Why should men of notable merit be driven so often to shriek out wildly against the injustice of the world, ending, if they have not hard hearts, or be not much given to tobacco or other sedative, at the bottom of the fishpond or in the madhouse? Many more there are too who, although they have not so ended, yet have once or oftener shuddered, chilled, as it were, by the cold shadow of madness passing over them. There can be no doubt that the way of the world does press hard upon the young and honest soul, before the conscience has been seared with conventional iron; before the man has been pressed and stamped into the uniform currency of respectability. Happily has it fallen out for him personally if he has not flared up in momentary brightness; if the all-grasping fingers of respectability have clawed hold of him, and rescued him from madness or destruction. Aye, that, instead of belching forth the truth as it appears to him, and, if so be, dying of starvation, better for him he should take to himself a wife, become a hero to such discerning female, and come to the belief that conventionalities are "eternal veracities?" Yes, let it be wisely done, since the economy of the world requires it; let the man be fashioned into an artificial machine since it must be. Is not this verily the age of machinery, an age in which the soul of man has

entered into woodwork and ironwork, animating them ; in which cotton has become conscience ? What a magnificent metempsychosis !

May charity extend even to the brandy and water of genius ? Why not ? Blank, utter hopelessness in the world may palliate in part what it cannot excuse ; and, on the whole it is probable, that there is more blank hopelessness in the world than is generally supposed. It needs not that we dive into the dark arches to discover it, if we only use our eyes aright. The shuddering ragged figure, crouching there by the muddy river's brink, is sometimes happy compared with the wearied hopeless soul, disgusted with the emptiness of all things on earth, and faithless as to anything after earth. Why should life be prolonged ? It has hitherto been but a scene of intense but unsatisfied longings ; a scene of dull heavy wretchedness, a gloom relieved only by a rare flicker of murky brightness. It may admit of question whether it be not with certain constitutions more endurable to suffer the sharp pang of acute physical disease, than to bear that constant dull aching pain which accompanies certain chronic affections : and so with mental suffering. It is an old story, as old as life. " All things are full of labor ; the eye is not satisfied with seeing, nor the ear filled with hearing. The thing that hath been, it is that which shall be ; and that which is done, is that which shall be done ; and *there is no new thing under the sun. Behold all is vanity and vexation of spirit. There is nothing better for a man than that he should eat and drink, and that he should make his soul enjoy good in his labor." " Let us eat and drink, for to-morrow we die." Let us drink then—drink away the weariness ; for is not a drunken man for the time being happy ? Yes, he laughs in his momentary strength at the voice of melancholy, laughs, triumph-

*" We have heard of an Englishman," says Goethe, " who hanged himself to be no more troubled with putting on and off his clothes. I knew an honest gardener, the overseer of some extensive pleasure grounds, who once splenetically exclaimed, ' Shall I see these clouds forever passing from east to west.' It is told of one of our most distinguished men that he viewed with dissatisfaction the spring again growing green, and wished that, by way of change, it would for once be red. These are specially the symptoms of life weariness, which not seldom issue in suicide."

antly, and revels in an ideal world, where he can have his own way with this calm inexorable destiny of real life. He experiences the delightful sensation of power, and feels something of a realization of those inward aspirations—

“While the fond soul,
Rapt in gay visions of unreal bliss,
Still paints the illusive form.”

What though fierce repentance rears her snaky crest, she can not steal away the pleasure that has been. Is it asked,

“Who buys a minute’s mirth to wail a week,
Or sells eternity to gain a toy?”

The reply is, that a minute’s mirth may be worth the wail of a week: being so much mirth secured which sobriety could not have given; *that* being equal only to granting a little less intense wail for a lifetime. “Crown me with roses, let us drink wine, and break up the tiresome old vault of heaven into new forms.”

Furthermore, may it not be that, by the aid of brandy, man may get a quicker insight into things which can only be seen into with much difficulty and much labor without? True he thereby sacrifices time to power, but so pleasing is it to get a glimpse of that “Divine idea which lies hid at the bottom of all appearance” that many may be found who would gladly give up half their life for such an object. It may be a mere fancy, but it certainly seems that in some of the best writings of our best authors, one may detect alcohol. Be this as it may, however, and whatever genius may do, it is clear that in the world’s movement onwards, alcohol plays an important part.

We shall best realize the importance of this agent, if we remember that the effect of an action, *however caused*, persists for all time, it blends itself with the universe, and has an influence in all that is to come, whether for good or evil. Now, though we see much more of spirit-drinking than is desirable, yet there is much that we do not see; and perhaps, the gravest circumstance in the case is the great quantity consumed in secret; in the closet by respectability when it imagines that no eye sees it. It was the remark of a successful physician of long experience, when it was observed regarding the habits

of a person of great attainments that although he did not appear to be given to drinking, "he might have been a gin drinker": which, by interpretation is that, as the result of a long experience, it had chanced to that physician to discover that many closets contain gin bottles.

It really is amazing when we reflect upon it—and the observation is by no means new—how little a man does know of his nearest friend or acquaintance, of his fellow-man in any situation; he sees but the appearance of him. Could he unroof his neighbor and look into the inner principles of him, what revelations might there be. It may happen to him to discover, in unguarded moments, that the insignificant little mortal, whom a puff of the breath would almost annihilate, had high resolves and wondrous self-conceit; that the small curate had his eye fixed, with a sort of vacant flickering stare, on a bishopric; or, on the other hand, he might find that the eloquent and earnest popular preacher was in secret addicted to alcohol or to opium. Well, if we receive the benefit of the man's self-indulgence in his writings, or in his sermons, have we much need to complain, or much cause to blame? We act very strangely in this matter generally; so long as the man keeps his vice pretty secret, we accept him at what he professes to be, and raise no clamor. Every now and then, however, some one appears who, disdaining all hypocrisy, perhaps incapable of it, drinks down his consolation in the face of all the world, and exhibits himself as he really is; and then what a hubbub! Heaven help him, it is bad enough; but it is of no use howling at him; it is better to be charitably silent, remembering that an immense quantity of alcohol and of opium disappears, of which we cannot say where it goes; and remembering also that he is often most unmerciful to the sinner who is in secret guilty of the vice which he condemns.

What then, as the result of these reflections, is there left for a man of sensitive temperament, and of little self-control, to do in the apparent universal wrongness of things? Go mad: well he often does, and so ends. Commit suicide: that also has been done by, amongst others, poor Chatterton. Or, take to opium eating, and af-

terwards come forth, like Coleridge, to censure De Quincey. Or, finally, if it must be false comfort, he may find consolation in drinking brandy. Many have done so, amongst whom, not the least notable, is Edgar Allan Poe, to a consideration of whose character and writings the foregoing observations are intended to be prefatory. They will have answered their purpose, if they have in any way served to indicate the difficulties under which men of certain endowments are by their nature placed, in the struggle to live, and at the same time to develop according to their inward impulse.

But before proceeding farther it may be well to note this unhappy difficulty in the way of a man struggling through life—that he never discovers the laws by which he should be governed until it is nearly time for him to take leave of existence; only sad experience teaches him how foolish he has been, and only when the opportunity is gone is he able to see that it has been going. How many a noble existence has been wrecked by a false step in early youth; and yet how could the unhappy youth know the painful and abiding consequences of his error? the vessel is alive to the danger only when it has crashed upon the breakers.

"Ah, heavens! that it should be possible for a child not seventeen years old, by a momentary blindness, by listening to a false whisper from his own bewildered heart, by one erring step, by a motion this way or that, to change the current of his destiny, to poison the fountain of his peace, and in the twinkling of an eye to lay the foundation of a life-long repentance."—*De Quincey*.

This is a serious consideration, and should at any rate, make us charitable towards any one who has turned in youth from virtue's paths, and whose way thence has been onwards to the black waters. It is so difficult, nay, it is impossible quite to retrieve an error. The act has gone forth from the individual, but has not vanished into space; it meets him, as it were, at every corner, confronts him, it might seem almost miraculously, wherever he turns; compels him to change the circumstances of his position, to change himself; he cannot possibly be what he was before. Having yielded to temptation, he has weakened himself, and has added one to the number of the enemies who will meet him in the gate—one, too, who knows

his infirmity, and is exactly qualified to cope with him in his weak part; a portion of his force has, in fact, turned traitor, and gone over to the enemy with information. No wonder, then, that so many, having once gone wrong, flounder for ever afterwards. Even when they strive to avoid falling deeper, and labor to recover themselves, it is often labor ignorant and vain; they do not recognize their change of position, do not feel that they have done wrong, and must accept the consequences, but hope foolishly, and endeavor vainly to go on as before, and the line of battle is broken from the want of concentration of force after so heavy a loss. It is truly a painful thing to watch a man fighting bravely, and yet quite hopelessly, from ignorance of generalship, like a brave army done to death by the folly of its leaders. But men are so unwilling to retreat; even after grievous error, when circumstances are more threatening, and when they are much weaker, forgetful that it is better to gain small victories, and to be strengthened thereby, than to suffer one great defeat and to be ruined, that it is better to take retribution to one's arms as a friend, than to make of it a constant and inveterate enemy. There are some, however, and they are the heroes of life, who are so strong that they cannot well be seriously beaten; they go in to win, not rashly and madly, for they are strong in reason, but wisely and firmly; they do not run their heads full tilt against circumstances, and fall down crushed and bleeding in consequence, but seize hold of circumstances, bind them together, and make of them a support. Perhaps this is the surest sign of calm real strength, the best test of a great man—this power of retrieving error, of dragging success out of misfortune, of asserting free will over necessity; what else, indeed, if we consider it, is a well lived life? It is, in truth, of all spectacles the most pleasant, to behold a man after mishap, gather up the reins with firm grasp, and firm resolve to recover the lost ground, to see him start steadily and cautiously, with that determination to succeed, which surely, sooner or later, effects its own accomplishment. There he stands, calm in the storm, clear in the gloom, solid amidst the changeable—

“Like some tall rock that rears its awful form,

Swells from the vale, and midway leaves the storm,
While round its breast the lowering clouds are spread,
Eternal sunshine glitters on its head."

There can be no doubt who is the truly great man, convulsion, as Carlyle says, not being strength. Still it behooves us to credit a good sum to nature in the case of these strong men. For to every one has not been given the power to gather strength from weakness, and to pluck out from the withered leaves of folly and misery, the green laurel leaf of victory; in fact, a Shakspeare or a Goëthe is rather a rare phenomenon in this universe of ours.

It is always possible in passing judgment upon a man to look at him from two distinct points of view, and thus to arrive at two different opinions as to his individual responsibility. The net product may be taken, compared with some fixed standard, and pronounced deficient or otherwise accordingly; or the factors concerned in the sum may be regarded, and the opinion given on their relation to the product. The way of the world, for the most part, is to take a man as he appears in his actions, to measure these by a certain conventional standard, and then to go no further in the enquiry, but, forthwith to pronounce authoritatively—most likely, if there be any tincture of originality in the man—to damn him pretty distinctly. Such a method is eminently unjust, its result on the whole being, that the man of sterling honesty and sincerity is branded as a serious sinner, or at any rate is marked with a note of interrogation, while the plausible hypocrite passes muster with commendation. Now, there are three facts which, militating against such a mode of procedure, suffice to upset it completely. The first is, that man is not the measure of the universe, nor of its Creator: the second is, the impossibility of any man producing himself, springing up by spontaneous generation just such a being as he might wish to be: and the third fact is this, that a man cannot, either mentally or bodily, live in *vacuo*. Admitting the standard of comparison to be correct, which it might be had the world ceased to move, there are to be taken into consideration then, in the formation of a just judgment, the original nature of the man, and the circumstances in which hap-

pily or unhappily, he has been placed—the character of the modifying force, and forces amidst which this has been placed. It is from practically neglecting these important considerations that we sometimes stare aghast at a man in helpless paralytic attitude, as though he were some strange and inexplicable monstrosity in the universe. Science has satisfactorily demonstrated the so called physical monstrosities to be nothing more than particular arrests, exaggeration of development, still in accordance with a certain definite type; and so it may be probable, if we will but consider it, that moral monstrosities have come to that pass by sure laws. Edgar Allan Poe, therefore, “such a warped slip of wilderness” as he was, we cannot look upon as one rushing through space without purpose and without orbit; and black as his character seems, yet may there be, in an examination of circumstances, some explanation. Nay, if we reflect for a moment, on such a phenomenon as a scoundrel without excuse, is it not a physical impossibility in the universe? Effect coming in the form of “error and evil behavior,” may have its cause somewhere back in the far past. For how much therefore are we to doom the man responsible?

By the necessity of its nature, genius is compelled to move more or less out of the beaten track; and the paths of knowledge and of morality, at any rate of practical morality, run parallel, so that when a man gets off one, his relation to the other is also considerably changed. Now, the greatest seem often to have the power to drag the unwilling world after them, in spite of its many-tongued cry of “shame,” until by success they have stayed the noise, and have forced themselves into acceptance. But many, and many a one, wondrously endowed, yet of a lesser order, wanting that calmness of temperament and that control of reason, which are necessary to sustain them in great conflict, fight and fail. It is a grievous and painful spectacle to observe their tragical struggles, and miserable end—to see the taper, lighted from heaven, prematurely flare out in bitter sorrow and anger. Such have been called the *Infanti Perduti*—*The Forlorn Hope of Humanity*.—“Looking back on their pale, disfigured faces, where the wrath of a Titan is so often blended with the weakness of

a child, and the fury of a maniac with the light of immortal love, it is no weak, unintelligent, useless pity which loves to dwell there, and to find there if possible, instruction and hope."—*Infanti Perduti*.—*Edinburgh Essays*.

We must, indeed, look back at such, so mighty, yet so fallen, in order duly to appreciate the gigantic nature of those who have fought the fight, and have won the battle. The strength of the building which has remained firm and uninjured after the earthquake, is best understood by contemplating the massive ruins around it. How otherwise can we feel the wonderful significance that there is under the ordinary, quiet, exterior life of William Shakspeare? What sufferings must he have undergone, who could create such characters as those of Hamlet, Macbeth, Othello, and Lear? and what power must he have had who after all, lived a quiet life, died in peace with all mankind, and might have had the epitaph of the most ordinary stuccoed respectable? Perhaps, great as his works prove him to have been, his life proves him greater. Is there anything in experience which can satisfactorily represent to the mind the compressed force that there was in Shakspeare? Were any conception of the final break up of the world possible, one might form some idea of the crash amongst moralities and conventionalities which would have been produced had he exploded. But he was far too great and too wise for that; and has left an example to prove to all ages, and to all spasmodic individuals, that genius can conform. Perhaps he has further proved that it is only the very greatest that, seeing beyond, can so conform; and that this of all others, is for genius the hardest task under the sun, being, when accomplished, the surest mark of the *greatest*.

Nevertheless, however reason may commend such men as Goëthe and Shakspeare, our sympathy will always be most with the fallen—with Burns or with Poe; the former appear so distant from us, almost Godlike; the latter are near to us, and we feel them to be of the same nature as ourselves. It is a great service to render to humanity, for a man who has suffered, to embody his sufferings with beautiful art in a drama or in a novel, and there to let the evidence

of them end ; but the feelings will always be on the side of the genius who could not be calm, and conform to the inevitable, but who bruised himself to death in the fearful conflict. And one cannot see how this is to be avoided, so long as humanity itself is not simply an exquisite drama, or a beautiful picture, or a cold marble statue. Perhaps there may be, after all, justice in the direction in which the feelings point, seeing that there is considerable selfishness often in self-control ; and seeing also that a man is not to be credited with his temperament as with a virtue. Goëthe, for example, when in the flush of youth, at that period of life when man is least apt to calculate consequences, and most prone to generous impulses, never appears to have forgotten his future interest. Falling in love (not once only) with a woman not his equal in worldly position, and engaging deeply her affections, he took his departure, suddenly, and without excuse, and left her disconsolately to pine alone, when the time for action came ; so that it is almost impossible to read the history of Goëthe's youth without hating him. Luckily, the sure ages always do bring justice, and we can forgive the resistings of Goëthe's youth when one sees him hag-ridden in old age. Now Edgar Poe, with such a temperament as he had, would most surely, under like circumstances, be rash and impulsive ; he would be the victim, not the victim maker ; there would be with him no calculation of consequences, no fear of frustrating his destiny, but an utter abandonment of himself, heart and soul, to the strong passion that was in him. There might, however, in this abandonment, be as much of selfishness as in Goëthe's self-control ; little merit can be justly credited to either of them, inasmuch as the differences between them are constitutional and fundamental.

Edgar A. Poe was born at Baltimore, it is believed, in 1811 : was the grand-son of a quarter-master general, the great-grandson of an admiral, and the son of a father named David, who gyrated in an irregular manner through the universe. For he took to his arms in lawful matrimony "an enchanting actress, of uncertain prospects," of whom he begat three children—Edgar the eldest. Here now is the place for respectability to make a moral demonstration ;—the

son of a quarter-master-general and grandson of an admiral ;—so well connected,—to marry a strolling actress. How disgraceful ! What will society say to it ? Was it not possible for you, foolish David, to have taken her as your mistress, and thereby to have kept yourself within the pale of decency—to have taken her for the better only ? But to have taken her “ for better or for worse ”—it is pitiable, and the decencies discard you. So David Poe, deficient of decencies, bade farewell to law of which he had been a student, along with respectability, and with Elizabeth Arnold, the beautiful English actress, went forth into the wide wide world. On the whole, the wide world cannot be said to be a very suitable place for a man to enter upon who has given up a respectable routine for a beautiful actress—if he wants to do anything but to die therein. Oh, it was pitiful, it was bad, irrecoverably bad, David Poe, for are not the sins of the father visited upon the children unto the third and fourth generation ? We grieve for the transaction, yet we cannot well regret it ; for had not things so happened, there would have been for us no Edgar Poe, no Raven, and no Lenore. Strange, and the observation is very trite, how far back lies the origin of any event in this world. The thing done remains in action forever. One cannot help thinking of the young lawyer sitting with enraptured countenance in the pit of the theatre, absorbed in the enchanting actress upon whom every one of the multitude present was absorbed in admiration—for she was a great favorite—who should have pointed to that face, and have said, that in the sympathetic and admiring glance which beamed therefrom towards that actress, lay the germ of things which were to occupy the world's attention, as long, may be, as it existed. Edgar Poe, his poetry, and the amazement of mankind at his strange, lurid, irregular existence ! nay, that glance is also actually accountable for this present waste of ink and paper.

David Poe, after discarding respectability, cast in his lot with his wife, himself became an actor, and after six or seven years of such life, fell sick and died, leaving in “ utter destitution,” three children, Edgar, Henry, and Rosalie. His partner in sorrow, having accomplished what play within a play she was destined to perform, shuf-

fled off the stage of life about the same time, to join him, we may fervently hope, in that kingdom where there are no more plays of the tragedy sort, but where the tears are wiped from every eye. There can be little doubt that there was tragedy enough for them in their sojourn together on this stage of time—much angry recrimination, passionate outbursts, tragical remorse, and, at any rate, final departure in “utter destitution.”

Inasmuch now, as a man is not his own father, it is incumbent upon us to take these things into consideration in estimating Edgar Poe. For we may rest assured of this, that infirmities of mind are transmitted from parent to child by a law as sure and constant as is any physical infirmity. Consumption is not more constantly inherited than is insanity, and the peculiarity of temperament which manifests itself in moral disease, descends as surely as either. “The weaknesses and defects,” says Nathaniel Hawthorne, “the bad passions, the mean tendencies, and the moral diseases which lead to crime are handed down from one generation to another, by a far surer process of transmission than human law has been able to establish in respect to the riches and honours which it seeks to entail upon posterity.” If then a man have inherited the constitution and temperament of his father, and if that father went wrong in youth, living ever after in an irregular way, aggravating in fact, as far as possible, the inherent mischief, it can be no matter of astonishment should his son turn out to be an irregular being; for it is as certain that weakness added to weakness through generations, cannot produce other than weakness, as it is, that equals added to equals, cannot result in anything but equals. And if the circumstances into which the offspring is introduced, instead of being purposely and intelligently determined for combating the evil, be those which of all others are most favorable for fostering and developing it, what possible good can come? Then, again, there is much to be attributed to the mother’s influence during gestation. Before the child is born, it is certain that its after-constitution may be seriously affected by its mother’s state of mind. Numerous examples, in the shape of visible changes in nutrition on the body of the child, attest this fact; but these may,

after all, be looked upon as coarse illustrations. It is the delicate and sympathetic nervous system that suffers most from shocks of the mind; and hence it happens that active emotional states of the mother's mind are sometimes notably attended with a change in the nutrition of the nervous system of the unborn babe. The child may be born with a hyper-sensitive nervous organization, and may be no more able to help being excitable, or having a vicious tendency, than the earth can help moving in its orbit round the sun, or than the sun can avoid shining alike on the just and the unjust. Thus, a mother during pregnancy, is exposed to a sudden fright, and her child is born, subject for the first few years of its life to convulsions, it soon afterwards has a manifest affection of the brain, and ultimately gets into a state of terrorism, in which, as it grows up, it sees persons armed with daggers and pistols, for the purpose of murder, and hears bullets whizzing through the air: the fright of the parent has thus been incorporated into the constitution of the child, and what was a temporary occurrence in the mother, becomes a permanent and, as it were, a natural constitutional defect in the offspring.*

Such things happened during the French revolution, and in the fearful war in La Vendée. Let us apply such considerations to Edgar Poe. Given then in his case a father who had been defiant of respectabilities, and who had lived in an irregular way; given a mother who had been very beautiful, and who was an actress; given also "utter destitution," and the many untoward circumstances which two such words connote, and what, in the way of product, are we justified in looking for? Surely some such a child as that of which Poe was the development. Development—that introduces another important consideration, the circumstances under which it took place, excitable temperament and perverse disposition inherited from the parents; it behooves us next to examine how these were dealt with—what was the education? For it is a very unjust error, of which the world is guilty in its judgment of a man, to look upon him as solely responsible for all the error or evil which he may

*Esquirol, *des Maladies Mentales*.

have fallen into. Might it not be almost as just to say to the tree planted upon a rock, "Why hast thou not grown?" or to the horse in the knacker's yard, "Why dost thou not shake thy mane, and laugh at the voice of the thunder?" Oh! is it not too true that man at the best, can only control circumstances in a pigmy way, not fashion them? And if there is implanted in him a principle which, by an irresistible sympathy, assimilates the untoward circumstances, stretches out towards them, finding there its suitable nourishment—the predominant tendency being so situate—what is to control circumstances? Accident, or what we in our ignorance call accident, often fortunately effects this for us. For in the endless variety of circumstances in which by possibility a man may be placed in this world, there is probability which is often realized, that the evil may be corrected, that something may occur to modify the peculiarity, that some result may be brought about antagonistic to the development of the inherent mischief. It is thus a happy thing when a man learns grammar in early youth, when he finds that as well as "I," there is a "thou," and a "he;" and by conjugating, comes to perceive that "thou hast a passion," and that "he has a passion." Edgar Poe never appears to have had an opportunity of learning this lesson until it was too late to profit by it. Let us hear him speak himself:—"I am the descendant of a race whose imaginative and easily excitable temperament has at all times rendered them remarkable; and in my earliest infancy I gave evidence of having fully inherited the family character. As I advanced in years, it was more strongly developed, becoming, for many reasons, a cause of serious disquietude to my friends, and a positive injury to myself. I grew self-willed, addicted to the wildest caprices, and a prey to the most ungovernable passions. Weak-minded, and beset with constitutional infirmities akin to my own, my parents could do but little to check the evil propensities which distinguished me. Some feeble and ill-directed efforts resulted in complete failure on their part, and of course in total triumph on mine. Thenceforward my voice was household law, and at an age when few children have abandoned their leading strings, I was left to the guidance of my own will, and became in all but name, the master of my own actions."

Here, then, we have it all ; "imaginative and easily excitable temperament ;" "development" thereof in Edgar ; "wildest caprices, and the most ungovernable passions ;" "weak-minded parents beset with constitutional infirmities akin to my own," and so on. There is one phrase in this bit of autobiography which it may be well to seize and dwell upon for a moment ; his parents were beset with constitutional infirmities akin to his own, to which, "wildest caprices, and the most ungovernable passions," as might have been expected in the case of an individual who had run away from his prospects with a beautiful actress, and in the case of a beautiful and favorite actress, who had married an eligible match, and had found by bitter experience that there was nothing eligible in it. "Wildest caprice,"—poor David doing the most perverse, out-of-the-way things in a defiant, desperate way ; and the once enchanting actress in no wise sparing him her tragic tongue ; "the most ungovernable passions," perhaps what little crockery ware or furniture there might be with "utter destitution," flying about the room ; and over all a leaden cloud of repentance and remorse. Edgar Poe was thus born under a canopy of remorse, and imbibed as his first lesson, the melancholy dirge of "Nevermore ! Nevermore !" Here was, indeed, an atmosphere of circumstances for educating, inducing, bringing out what good or bad tendencies nature might have implanted in him. Even in the earliest childhood the surrounding influences exercise a powerful effect upon the child ; it assimilates them unconsciously, and they become a part of it. The mother who flies into a violent passion, and raves accordingly, does not rave idly ; her infant, sprawling upon the carpet, may feel the effect, unconsciously incorporating into its system the power which passion represents—power persisting through eternity ; there can be but few idle words or acts in the universe. Esquirol relates an extreme case in which the effect of evil influence was marked. A little girl of three years of age frequently hears her step-mother cursing in her passions, and soon becomes, as it were, insane—wishes constantly for her step-mother's death, and, at the age of five years and three months, makes the first of several attempts to kill her. Whence it is manifest that passion and curses

are not attuned to a healthy child's feelings, and further also manifest that they produce serious consequences, even though these be not apparent at the time.

What Poe's education was likely to be, we may easily conceive—an excitable and passionate disposition having been set to sail in a whirlpool of passion; the vessel in the midst of a raging storm, having to make the quiet harbor without rudder and without compass. Should the storm resolve itself fortunately and a propitious wind drive it to the haven, good and well; if not, there will be no cause for wonder if the vessel be lost. We have seen what Edgar Poe said of his circumstances; "feeble and ill-directed efforts," to correct an unhappy disposition, ended in his being left to the guidance of his own, and to the mastership of his own actions. So the unhappy child was placed; no propitious Deity to pour oil upon the troubled waters, nay, rather malignant fate in the form of unhappy circumstances, pouring oil upon the flames. Thus, native bad, by the addition of acquired bad, was made worse. The unlucky law-student, running away from respectability under that foolish enchantment, had not done in that act of his all the evil that destiny had doomed him to do. May we not surely depend upon this, that consequences of evil action follow as inevitably thereupon sooner or later, as does the day on the night, or the night on day; that human actions are under as certain laws as is any physical phenomenon in the universe. The whole course of a man is changed by one act of his life, and not so, but the course of his children. Whatever power the man may represent, whatever he may do for all his lifetime, the force that each individual embodies, dies not with him, but goes forth working to all eternity—ends not when the earth is shrivelled up like a scroll of parchment, persists through the courts of heaven, and in the cells of hell. It would be a sobering reflection for a man if he could but realize it, that he represents so much *force* in the universe, and that force cannot be annihilated; therefore, that every word and action which he launches on the ocean of time and space, goes its way and is never lost. Each individual represents, as it were, force self-conscious for a time in the conflux of two eternities—from everlasting to

everlasting ; and therefore that every word and act must surely appear on that great day when all is completed. "It is a high, solemn, almost awful thought for every individual man, that his earthly influence, which had a commencement, will never, through all ages, were he the very meanest of us, have an end. What is done, has already blended itself with the boundless, ever-living, ever-working universe, and will also work there, for good or for evil, openly or secretly, throughout all time. But the life of every man is as the well-spring of a stream, whose small beginnings are indeed plain to all, but whose ulterior course and destination, as it winds through the expanses of infinite years, only the Omniscient can discern."—*Carlyle.*

Thus considering our helplessness, and yet our importance, have we not abundant cause to admire the mighty, nay to us, fearful Intelligence, which conducts us so unconsciously upon our way, the "Providence that shapes our ends, rough hew them as we may?" Yes, wrong as it sometimes seems that we have gone, and bitterly as we may repent it, both the wrong and the repentance have their purpose in the sum-total that our existence is working out in the scheme of the universe. So, when respectability shrieks out at us for running away with an actress, or such non-defensible action, although we are sinning perhaps as regards ourselves personally, and respectability has a just right to clamor at us, yet we are not dashing blindly through space, but are guided to our destined end by the unseen hand of Omnipotence. Men may shake their heads, or stand aghast at us ; but then men at one time stood aghast at the comet, as though a fearful and unguided danger were rushing through space, deeming, forsooth, in their wisdom, that the Omnipotent was asleep or upon a journey. Let a man, then, having done grievously wrong in the world be fully prepared to accept the consequences of his wrong, whether these come in the form of injury to his worldly prospects, or in the form of intense mental anguish, such recompense being inevitable ; but let him not despair, as though he had frustrated the purposes of his existence, and were an anomaly in creation. He is going right, although he has gone wrong, and bitter re-

pentance accompanies him on his way. Strange moral phenomena are not purposeless in the universe.

"Yet they wha fa' in fortune's strife,
Their fate we should na censure,
For still the important end of life
They equally may answer."

The circumstances amidst which Edgar Poe's infancy was passed were the natural result of the conjunction of the actress and of the law student, and Poe himself the inevitable ultimate product. In the contemplation of his life it is almost impossible to avoid the conviction that circumstances were intelligently determined so that he might become just what he was; for when his parents died, he, being a handsome and lively child, was adopted by a rich Virginian planter, who had no children of his own. Kindly as this was done, it was not altogether a blessing; and perhaps this observation may be made, that if a rich and childless man and his wife adopt a lively and handsome child they are likely to make of it a kind of plaything. But a child is not a light and amusing thing to be played with, but a very serious thing to be worked upon; and that, not by irregular and spasmodic effort, but by constant and sustained attention. Edgar Poe would above all other children, require such effort; for had he not already been too much spoiled? spoiled, as we have seen, fundamentally in his origin; spoiled in his embryotic life; spoiled in his earliest infancy; spoiled by his father, by his mother, and by circumstances? And yet had destiny reserved for him yet further unhappy influence; for in the house of his adopted parents he was indulged and humored, until, young as he was, he became master there. Evidently, the kind people who had taken pity upon the young orphan had no adequate idea of the responsibility which they had undertaken. Unfortunately, there is nothing singular in such a circumstance; a child not spoiled is becoming every day a rarer and rarer phenomenon; and one might be tempted to conclude that it was, after all, natural and proper to spoil children, were it not that there is so much sin and so much evil in the world. General indulgence, relieved by an occasional act of capricious severity,

and such act followed by sure extra indulgence afterwards—that is one method of training childhood. In process of time the result comes out, an Edgar Poe, or something of that sort, exactly what any reasonable being should expect; and then foolishly also often comes a howl of anger and astonishment, a sort of expostulation with Heaven, in that it had not reversed its laws, and planted the rose of virtue on the tree of folly. Have we not, in Poe's case, been so far prepared as not to expect "grapes from thorns, or figs from thistles?"

After so much of the malignant, came for a time a little sunshine. Poe was sent to England in 1816, where he remained for five years at school at Stoke Newington. "Encompassed" says he, "by the massy walls of this venerable academy, I passed, yet not in tedium or disgust, the years of the third lustrum of my life. The teeming brain of childhood requires no external world of incident to occupy or amuse it; and the apparently dismal monotony of a school was replete with more intense excitement than my riper youth has derived from luxury, or my full manhood from crime." We may consider this as the evidence of his having been at last under a beneficial system; for it appears that man always is in reality happiest when he is under some restraint; when by the force of rods or rules or conventionalities and respectabilities, in spite of ebullition of passion, he is forced into self-denial, and made a reasonable creature. What else, indeed, can be expected, seeing that happiness, such as is to be had, follows in the train of moral law, even if it be morality by compulsion? The greatest satisfaction doubtlessly results from self-government, by the laws of a wisely developed reason, but such development can only take place through the force of reason that exists in the rules applied for government in youth. Looking at his after life, we cannot suppose that Edgar Poe assimilated such reasonable restraint, and profited by it; and perhaps we have no just cause to expect that he would. For, that assimilation may take place, there must be an adaptability of the matter to be assimilated to the substance into which it is to be received; and, as we have already seen, in the present case, there was on one side inherited

passionate and excitable temperament, aggravated by unhappy circumstances, and on the other routine and rule, whence came little in the shape of available nourishment. If there were any sense in regretting aught that has happened in this world, one might regret that such outer control had not been exercised on Edgar Poe for a much longer time, or at a much earlier period of his life. It were perhaps as well, however, to accept the government of the world as we find it, and forbear for the present criticising, from our point of view, the ways of Providence: sufficient it is for us to observe them, and to learn therefrom what lessons may be serviceable for our individual guidance.

Poe returned to the United States in 1822, went for a few months to an academy at Richmond, and thence to the university at Charlottesville. Think of him for a moment so sensitive and so excitable, in the spring-time of youthful manhood, in the novelty of new passion, thrown into the license of the university. When a man gets a new coat, he can not rest quiet long until he has tried it on, and has looked at himself in it; and are we to wonder that a man should be eager to gauge a new passion; especially if he be one who by constitution is endowed with such an unhappy intensity of feeling as was Edgar Poe. It would have been amazing had he, such as we have seen him born and so far built up, resisted. No! he went his natural and inevitable course; he plunged headlong into dissipation, and became remarkable as the most wildly reckless and debauched of all students! and, yet he was noted for his quick intellect, his brilliancy and vivacity, and his skill in fencing, swimming, and all such feats—not incompatible elements with immorality in a character, as too many examples every day prove. Indeed, looking curiously at the young men of an university, one might be tempted to conclude that those with the best natural endowments were the most given unto dissipation; and that it was the moderate and plodding man who bore the best character and carried away the most honors. Perhaps this may be considered a wise dispensation, whereby the plodding man may have an equal chance in the battle of life; for what would become of him in the strife, if talent were always industrious and

respectable. Opinion is very inconsistent in the sentence it pronounces at different periods on remarkable men. Now-a-days every one feels himself justified in sneering or smiling at the Justice Shallow, who prosecuted William Shakspeare for deer-stealing, though it might appear that the Justice was only doing his duty, and was sanctioned therein by the unanimous verdict of respectability. But the after development of Shakspeare has put the Justice on the wrong side; and there he hangs, ludicrously gibbeted for ever. Is not this somewhat melancholy? That a man, according to the faculty that was in him, should do his duty, and yet should, in consequence, be gibbeted for after ages to laugh at by the criminal on whom he was exercising legitimate justice. Really, but it would be well as a mere matter of policy to be cautious in passing judgment on the extravagancies of exuberant youth, lest after ages may have cause to laugh. Learned professors, unhappily often ignorant of human nature, are apt to look severe, and to talk of "talents thrown into the gutter," forgetting that there is a great deal of humanity in the gutter, and the man who has rolled therein, and has struggled out, may speak with much likelihood of benefit to such humanity. Misapplied talents and wasted time, says respectability, in professorial gown, forgetful that some have a talent for the gutter—forgetful, in fact, that wheat is wheat and not mustard seed; and that, moreover, manure is very serviceable in promoting the growth of it. Here is a pertinent question: what would have become of our great men, had respectability only had its way with them? Would not one have jogged on to death as he jogged on to market; and might not another have spent his energy in pounding pills in an apothecary's shop?

"All in this mottie, misty clime,
I backwards mused on wasted time,
How I had spent my youthfu' prime,
An' done naething
But stringing blethers up in rhyme
For fools to sing.

Had I to gude advice but harkit,
I might by this, hae led a markit,

*Or strutted in a bank and clarkit
My cash accounts;
While here half-mad, half-fed, half-sarkit
Is a' the amount."

Perhaps most people will now be of opinion that it was well that Burns did not in his "youthfu' prime" hearken to good advice—that it was better that, "half-mad, half-fed, half-sarkit," he was occupied in "stringing blethers up in rhyme." Can a man sing, except like a jay, or speak, except like a parrot, who has not suffered; and furthermore, will a man who is always good, suffer? "The gold that is refined in the hottest furnace, comes out the purest," in more senses than one. Herr Von Goëthe was guilty of many things in youth, antagonistic to respectabilities; but has not the after-development of him sanctioned these things as the right things for the youth? Heavens! let us cease, in common charity, if not in common sense, to direct a man, and to judge each action of his life by a certain high conventional standard. It is something more than absurd to seize upon a certain event in a man's life, and with doleful regret to whine, "What a pity that this so happened!" Let this question be pondered,—Should we have had the man, had such things not so happened? and if not, this further—was it not better on the whole that these events should have so happened than that we should have been without the man? The two greatest men perhaps that the world has seen, who seem, as far as can be judged, to have been fortunate in regard to equality of temperament and power of self-control, went not in youth exactly the way that respectability would have pointed out to them. Did any great man ever do so? The best thing then that we can do, seems to be to accept a man as we find him, not as though he were an anomaly upon earth, but as having a final purpose,

"And trust the universal plan
Will all protect."

Edgar Poe at this period of life took the wrong turning, and never afterwards recovered his way; he had been destined by constitution to it. Right was it that he should suffer in consequence, and suffer

surely he did. The immediate result was his expulsion from the University; and when Mr. Allen, his patron, who had been very liberal to him in money matters, refused to pay some gambling debts, he wrote to him a violent and satirical letter, and embarked on board a ship, with the avowed intention of joining the Greek insurrection, and of freeing Greece from the Turkish yoke. "We rarely hear of a more heroic project," remarks one commentator. It may have been so, but we can not see anything heroic about a man's weaknesses; they may have been inevitable, and must be accepted in the course of things, but they are none the less un-heroic. Heroic project! it was best but an impulse rising out of weakness; a passage out of the diary of a spoiled child; ungrateful pettish anger, with much of malice in it; gratification of his own personal resentment, with speedy forgetfulness of Greece and insurrection there—if such were ever seriously thought of at all. Heroic! Don Quixote, rushing at the wind-mill, was a hero in comparison. It would have been infinitely more heroic had he struggled to free himself from the dominion of his own passion, and from the taint of base ingratitude, which must now forever abide by him. Such as he was, however, the event is not to be wondered at—impulsive act in a sensitive and excitable temperament under the painful feeling of obligation. It is characteristic of human nature, when a rupture has taken place, to hate the giver of benefits, especially when the intent of these has been frustrated by wilful and wicked conduct on the part of the recipient. Hence it seems almost inevitable that Poe should have acted as he did; for the benefits had been so great, and his was a disposition in which self-feeling was everything, and reasonable will nothing. It is not, moreover, a characteristic of human nature, when it has been constantly bolstered up by indulgence and assistance, to be in any way strengthened thereby. A being so treated when deprived of his supports is apt to have a sort of convulsive fit, and, fancying it strength, to fall down heavily in consequence. So it was with Poe when he spasmodically started for the Greek insurrection, and, as might have been expected, never arrived there. Probably Greek insurrection lost nothing thereby. He was not the

man to sacrifice himself for Greece, or for any thing else; there was not born in him such capability; for had not his father sacrificed his life to a momentary passion for a beautiful actress, and transmitted to him such faculty for self-indulgence? Accordingly we find that after disappearing for a year he turned up in a state of intoxication at St. Petersburg, was relieved from his embarrassments there by the American Minister, and was sent back to his native land. On his return Mr. Allen was again kind to him; he was entered at the Military Academy, and in ten months was cashiered. Henceforth no good in life can be hoped from him. He had been tried in routine and respectability, and failed, which is at once damnation to a man. He had been left to his own resources to struggle amongst irregularities and non-respectabilities, and had failed there also. This latter failure indelibly stamps him with weakness; for had there been in him any of that high genius, which, although it goes off the beaten track, makes a clear track of its own, he could not have so missed his way. Is there power in a man, he may laugh at circumstances, for in some position or another he must rise above them, by a law as sure as that by which a stone must fall. Edgar Poe had no such power, and, being worsted in his dealings with the world, he complained, and whined, and begged: is not complaint in any case a sure sign of weakness?

Little is to be gained by pursuing the story of his life to its end; it is very gloomy. Cashiered at the Military Academy, he was received by Mr. Allen into his house, but behaved so badly, that writers only hint darkly, dare not venture to describe, how badly. He was turned out of doors. Next he enlisted as a private soldier, and in a very short time deserted. By birth and education he had now become what he was to remain, unstable as water; no important change for the better could be looked for. "Can the Ethiopian change his skin, or the leopard his spots?" Perhaps it is only in an asylum for the insane that the impossibility of reformation in a character which has grown after a certain type can be witnessed in its utter hopelessness. At times Poe seems almost to have felt that such an abode would have been fitting for him; at any rate he sent on

one occasion to a gentleman whom he had vilely injured, in the person of his sister, an apology, with a statement to the effect that he was out of his mind. Did ever mortal before make such an excuse?

After his desertion he became very poor and exceedingly wretched. His next appearance was as the winner of a prize offered for the best tale, and on that occasion he was found haggard and in rags. Wonderful ability as had been noted at college, was unhappily not the ability to keep respectable garments on him, a thing which any vestry-man can do. Really, inexcusable as it doubtless is, there is yet something refreshing in the contemplation of a man who is not equal to a good coat; it is the pig-stye interposed in the row of stuccoed buildings. Think of it thus—that this man alone in the midst of a multitude of featherless bipeds, has not the faculty in him to keep a coat upon his back: there must manifestly then be in him some singular other faculty. Spirit of Teufelsdröckh, what wilt thou say to it?

There is one pleasing circumstance in the history of Edgar; and it is this, that the world has no cause to reproach itself for neglect of him; as it does so reproach itself in respect of its treatment to certain unhappy geniuses. Kindness interposed constantly from the cradle to the grave, and did what could be done to rescue him from the misery that he was ever bringing down upon himself. His case may, indeed, be cited as instructively showing how vain it is to reproach ourselves for not showering aid on such unhappy beings. Would not Chatterton, being such as he was, have died of arsenic, or even more miserably, whatever had been done for him? And Byron, would he have been more wayward and more wretched, had he been born to poverty and starvation instead of being born to an income and to a coronet? When a man can not do something for himself he seems to be like a sieve, to let all the good others may do to him run through. Is it not, moreover, somewhat inconsistent with the character of genius to look for such aid? If the man has been sent into the world, so pre-eminently endowed, he has been sent to enlighten and to benefit the world, and not to be nursed and coddled by it like a delicate child. It is a poor case when insight and strength come

to rest for support on blindness and weakness. Better after all that genius should be miserable, and be cradled into poetry by wrong, "For they breathe truth that breathe their words in pain." After winning the prize for his tale, Poe was sought out by a Mr. Kennedy, furnished by him with respectable clothes, and placed in the way of employment as a literary man. In this capacity he wrote successfully, but acted very irregularly and unsuccessfully. The details of his conduct are sickening, and are best left undescribed. During this period, however, he married his cousin, Virginia Clemm, who appears to have been a very gentle and affectionate being. And in spite of his many faults, in his family relations Edgar Poe attracted much affection to himself. His mother-in-law, who faithfully and devotedly tended him and loved him after her daughter's death, speaks of him as "more than a son to myself, in his long-continued and affectionate observance of every duty." One does not, however, wonder that women should have loved him; he was weak, exacting, and, no doubt, demanded much assistance. There is a wonderful love of self-sacrifice in a woman's heart; and her love increases by trial of it; it is not on the strong self-reliant man that it is poured out in greatest abundance, but on the poor, feeble mortal who can weep upon her bosom, and confide his sorrows to her ears, demanding sympathy, compassion, and help. And many a poor helpless being who reels about, it might almost seem purposeless, on the earth, has abundant affection lavished on him, simply from the capacity that he has of receiving. Did not Marlborough do the right thing to make himself loved, when he took money from his admirers? A lively and brilliant, but feeble and not self-reliant man who is often in conditions requiring sympathy and assistance, is well adapted to obtain all the love that a woman can give. All accounts agree in this, moreover, that in his intervals of sobriety Edgar Poe was refined and attractive in his manners and conversation. "I have never seen him," says Mrs. Osgood, "otherwise than gentle, generous, well-bred, and fastidiously refined." Unhappily we know not his inner family life—a naturally refined soul under the most favorable conditions approached nearest that was possible to that ideal after

which it thirsted. The mad fits of his drunkenness are the most palpable things in Poe's life; and so the world's judgment upon him is apt to be drunk or mad. It is the way thereof. When Hamlet asks the grave-digger, "how long hast thou been a grave-digger?" the reply was that he "came to it on that very day that young Hamlet was born; he that is mad and sent to England." That was all he knew about the affair. "How came he mad?" asks Hamlet, anxious possibly to know if there was not some idea abroad of the fearful mental struggles through which he had passed in a mesh of tangled villainy. "Very strangely, they say," replies the Clown. "How strangely?" "Faith e'en with losing his wits." "Upon what ground?" "Why here in Denmark." Just so; why ask so many questions, the man having been mad palpably, and that being sufficient. What are circumstances and conditions to us, who have only to do with the man as he actually appears, as he walks amongst us? How came Edgar Poe to be a drunkard? Faith e'en with drinking. Upon what ground? On the public-house floor. And having thus settled the matter we pass on our way to the other side. Meanwhile there is a good Samaritan or two who tend him carefully, feeling instinctively that there is more in the matter than appears.

There are so many circumstances in Poe's life which might admit of blame, that it is not easy to fix upon one as notably so worthy; else his marriage with his cousin might, in a journal of this character, merit grave censure. Here was a man who by constitution and circumstances had developed into something as irregular and unstable as was possible without utter deliquescence; and by way of mending matters he marries his cousin. Had there been any offspring to such marriage, we should have been justified, by experience, in expecting that one would have been born blind or deaf, another strumous or deformed, another epileptic, and, perhaps, all mad at some time or another. Happily, however, one has cause, here again, to admire the wisdom which rules the world, and by sure laws obviates the mischief for which we so often lay the train. The eternal laws exhibit their warning in disease and deformity; and if such be disregarded, the end soon comes. A family given to frequent intermar-

riage, degenerates until there is no longer the capability of producing offspring, and then mercifully dies out; whereby it happens, that aristocratic pride can not perpetuate itself for ever. What would not man in his pride and in his folly make of himself, were it not for the powers that are above him?

During his marriage life, which lasted ten years, Poe subsisted on his literary labors, at one time as contributor, and at another time as editor, varying his work on one occasion by preparing, during the absence of the proprietor, the prospectus of a new magazine, by which he intended to supplant that which he had been employed to edit. Let this excuse, such as it is, be made for him—that it is very hard to make, contentedly, another man's fortune. Doubtless Poe felt, in a way he only could feel, that it was by him that this magazine was preserved in existence, and yet that he profited not most by it, but was rather employed as a literary hack upon it; whereupon, being a man who could only feel, could not look forward and reason, he foolishly and foully kicked. It is, indeed, foolish for a man to look only at his immediate position in the universe, and at what he may be doing therein, and thereupon to grow dissatisfied. What he should do, if he will do otherwise than act in his position, is to consider how he came there, and he will surely discover, if he have any faculty of insight in him, that he it was who placed himself wherever he may be. There is no accident in human life; "As a man sows, so must he reap." What is it then to a man that he should be making the fortunes of fifty persons, and should not be making his own, when their fortunes and his labor have come to that pass by equally certain laws. "Let the dead past bury its dead," if so be that it has an ugly aspect:

"Act, act within the living present,
Heart within and God o'erhead."

When Poe's wife died, which event happened in 1846, he was in a very destitute state, and certain kind souls appealed for help on his behalf in the newspapers. Of course Poe, while gladly getting hold of money wherever he could, denied that he wanted any assistance in high theatrical style, and then attributed such denial to a "justifi-

able pride," which had induced him to conceal his wants. There is need of all possible patience with men who act in this manner; no justifiable pride with them in acting rightly, but a cheap pride in talking grandly—the "justifiable pride" of a lie. Accept whatever assistance to the result of folly may be needful and can be obtained, and then in place of gratitude, or acknowledgement, take oath that it was never wanted. It is pitiable, but like other lamentable things, apparently inevitable. There are men who, like Poe, having such an intense *self*-feeling, can not realize the fact of a not-self; they seem to look upon the world as a place created for them to play their pranks in, and accept whatever help they may receive, not as a charity or a kindness, but as a right, and are ungrateful accordingly. Insincerity of character, one might say; for sincerity involves the appreciation of relation—of the relation of the individual to something else, as well as of the relation of something else to the individual; whereas the vision of such men is so much perverted by their self-feeling, that they are positively unable to see themselves in relation to anything else. So that insincerity with them is not really so wilful and wicked as it might appear. A radical evil has never been corrected by circumstances. So it was with Poe, who could never feel for any one or anything, except, as it were, through himself. And yet, from his poetry, it might at first sight appear that there was in him a powerful love for another; for has he not written some beautiful lines which have reference to his departed wife? Beautiful and melodious, truly, but yet no real feeling of sorrow discernible therein. One can not but feel, on perusal of his poetical lamentation, that it is artificial and ingenious in construction, and must have cost him much labor in plan and pre-contrivance—that it is not nature, not even true art, which is the reflex of nature, but artifice. It does not "grow up from the depths of nature through this noble sincere soul, who is a voice of nature." And withal there is noticeable a sort of selfish and unresigned tone about it. No solemn sorrow, or humble acquiescent resignation in the inexorable decrees of Destiny. When the wind came out of the cloud by night, killing and chilling his Annabel Lee, it was because—

"The angels not half so happy in heaven,
 Went envying her and me—
 Yes! that was the reason (as all men know
 In this kingdom by the sea),
 That the wind came out of the cloud by night,
 Chilling and killing my Annabel Lee."

And again, who can help seeing this stage passion in those beautiful verses, addressed to "One in Paradise," which may be quoted here in order to contrast them with the wail of real sorrow:—

"Thou wast that all to me, love,
 For which my soul did pine—
 A green isle in the sea, love;
 A fountain and a shrine,
 All wreathed with fairy fruits and flowers,
 And all the flowers were mine.

"Ah, dream too bright to last!
 Ah, starry Hope! that didst arise
 But to be overcast!
 A voice within, from out the Future cries,
 (Dim gulf) my spirit hovering lies
 Mute, motionless, aghast!

"For alas! alas! with me
 The light of Life is o'er!
 'No more—no more—no more.'
 (Such language holds the solemn sea
 To the sands upon the shore.)
 Shall bloom the thunder-blasted tree,
 Or the stricken eagle soar!

"And all my days are trances,
 And all my nightly dreams
 Are where thy dark eye glances,
 And where thy footstep gleams—
 In what etherial dances,
 By what eternal streams."

With which compare what a poet, whose heart was full of real sorrow, has said—

"Break, break, break,
 On thy cold grey stones, O sea!
 And I would that my tongue could utter

The thoughts that arise in me."

* * * *

"And the stately ships go on
To their haven under the hill!
But O for the touch of a vanished hand,
And the sound of a voice that is still.

"Break, break, break,
At the foot of thy crags, O sea!
But the tender grace of a day that is dead
Will never come back to me."

No doubt Poe felt sorrowful when his wife died, for she had ministered kindly and attentively to him. Had not she and her mother come nearest to what he thought the whole world ought to be in regard to him—the world forgetful of its destiny to wait upon him?

"She tenderly kissed me,
She fondly caressed,
And then I fell gently
To sleep on her breast;
Deeply to sleep,
From the heaven of her breast.

"When the light was extinguished
She covered me warm,
And she prayed to the angels
To keep me from harm—
To the queen of the angels
To shield me from harm."

Ah! it was very hard to bear so great a loss, and hope seems forever gone.

"Shall bloom the thunder-blasted tree,
Or the stricken eagle soar?"

Yes! within two years the thunder-blasted tree began to put forth new blossoms, and the stricken eagle sought another mate. Within that time he became engaged to "one of the most brilliant women of New England;" and one ignorant of Poe's character might suppose, from the lines which he addressed to her, that never man yet suffered from passion so intense and so exalted; but we can see here,

as we have seen before, only an artificial passion, a passion "from the throat outwards." The verses are those commencing—

"I saw thee once—once only—years ago:"

in which he informs the lady that, after her departure in the evening from the garden,

*"Only thine eyes remained,
They would not go—They never yet have gone,
They have not left me (as my hopes have) since,
They follow me—they lead me through the years,
They are my ministers, &c. &c."*

*"They fill my soul with Beauty (which is Hope)
And are far up in Heaven—the stars I kneel to
In the sad, silent watches of my night;
While even in the meridian glare of day
I see them still—two sweetly scintillant
Venuses, unextinguished by the sun!"*

Being congratulated, however, by some friends on his brilliant engagement, Poe replied; "No, No! you'll see there will be no marriage after all." And the way whereby he brought about the fulfilment of his prediction was, to appear in the street and at the lady's house exceedingly drunk and outrageously extravagant, so that the police were called in, Poe was carried away, and the match was broken off. It has been surmised by way of explanation that he felt that this brilliant lady knew only the better part of him, and that the marriage would surely make her miserable; he therefore broke it off as he did, not having strength of purpose to do it in any other way. But such an hypothesis gives to Poe's character credit for an unselfishness and sincerity which it is certain that it never possessed; and the strange circumstance admits of an easier and more natural explanation on the supposition of his selfishness and insincerity of character. He was possibly impressed with the feeling that a modest, lovely, unselfish Virginia Clemm was far better adapted to be his wife than "one of the most brilliant women of New England"—that on the whole it was very probable that the latter might make him miserable. "No! no! there must be no marriage." So one

day, when in his drunkenness this feeling came very forcibly over him, as on such occasions similar feelings are apt to do, and when drink had inspired him with that courage which, weak mortal as he was, he possessed not without, he started off suddenly with the determination to break off the affair somehow. And he succeeded by, perhaps, the strangest method that ever was adopted under like circumstances. Can we forget his apology on the occasion of previous discreditable behavior—that "Poe was out of his mind."

Soon after this unpleasant event, being through further excesses, reduced to a condition in which he was obliged to beg money at Philadelphia, he made a sort of convulsive effort to reform, by signing the pledge. Not the least certain evidence of his weakness of character, nor the least curious phase in his history this—Edgar Poe, a teetotaler! Here at Philadelphia, a few months after his last escapade, this "stricken eagle" again proposed to a lady and was accepted. So he set out for New York to prepare for his marriage; but on his way entered a tavern, where he met some friends, and what more need be said—gave himself up to a night of furious "debauchery," in the morning was carried to the hospital, where he died, aged, as far as is known, 38 years. Such a leave-taking is not altogether unexampled. Some nine months before his death, Burns dined at a tavern, returning home about three in the morning, *benumbed with cold and intoxicated*; he had in consequence an attack of rheumatism, and from that time gradually failed until he died. So pass away some men indubitably marked with the stamp of genius, leaving for our reflection the important question—how happened it?

Of all men of note who have walked upon the earth, it is scarcely possible to point to one whose history discloses more of folly and more of wretchedness than that of Edgar Poe. It was not because he sinned often because he sinned often and sinned sadly that his anguish of mind was lessened. Black-plumed remorse, as sure as death itself, visits all who invite it; and croaks its grating dirge of sorrow in the ears of the most abandoned, as largely and harshly as in the ears of the occasional sinner. Those fitful gleams of sunshine in his life indicate to us too plainly Poe's misery and remorse; and perhaps

more painful evidence thereof than all is that signing of the pledge. It was the convulsive effort of a miserable and feeble human soul to escape from its misery and degradation. But convulsion is not strength, and we wonder not that the act was followed by a speedy fall. Alas! imagination cannot penetrate the thick gloom of remorse which enshrouded this weak child of nature. Through life accompanied him "vast formless things,"

"Flapping from out their condor wings
Invisible woe!"

Acute sensibility is the prominent feature in Poe's character, and an intense love of the beautiful the genuine element in his poetry. It was through the former that he was rendered such an unhappy being in the world; it was by the latter that we recognize in him a spark of the divine light of genius. And among the unhappy tendencies which his father had transmitted to him, let us not forget to give due credit to David Poe for this exalted feeling. Had not the father been so sensible of the beautiful as to sacrifice all his prospects in life to the pursuit of the concrete beauty, his man might have wanted that intense aspiration after this ideal, without which we should have wanted his poetry. Every-day life does not unfortunately afford much satisfaction to such a feeling, and a man so endowed is apt to become wearied of the everlasting sameness of things, and desperate at the coarseness and selfishness of humanity. Not feeling calmly he cannot think calmly, and hence comes to express himself strongly—to speak of "Fate, whose name is also Sorrow," of society as "being principally composed of villains," and the earth as "a hated world" and a "damned earth." So spoke Edgar Poe; and one can not avoid contrasting with such outbursts the more calmly expressed conviction of a stronger and more far-seeing genius.

"I'll na say men are villains a'
* * *

But oh! mankind are unco' weak,
An' little to be trusted."

It requires a genius of a still higher order to be able to see through the crust of evil, and to discover "good in everything." Poe, hav-

ing just escaped madness, took refuge from the anguish of his crushed feelings in alcohol, and sought for consolation there; in intoxication he endeavored to realize his ideal of the beautiful. Doubtless whilst the excitement lasted he experienced joys which he could not grasp otherwise; but the reaction, which must have been so terrible, followed, and has left its stamp upon his poetry.

The truly genuine, the—so to say—sincere elements in his poetry are thus, his intense aspiration after the beautiful, and the melancholy of remorse. Everywhere, both in his prose and his poetry, do we find the expression of his keen love of the beautiful.

“Alas! alas!

I can not die, having within my heart
So keen a relish for the beautiful,
As hath been kindled in it.”

And again, of Helen's eyes he says—

“They fill my soul with beauty (which is hope).”

One of his earliest poetical compositions, written when he was but a boy, was that chaste and beautiful address “to Helen,” which is notable partly for the absence of the usual sepulchral gloom, in consequence of having been written before remorse had marked him for its own.

“Helen, thy beauty was to me
Like those Nicean barks of yore,
That gently, o'er a perfumed sea,
The weary, way-worn wanderer bore
To his own native shore.

“On desperate seas long wont to roam,
Thy hyacinth hair, thy classic face,
Thy Naiad airs have brought me home
To the glory that was Greece,
And the grandeur that was Rome.

“Lo in yon brilliant window niche,
How statue-like I see thee stand,
The agate lamp within thy hand!
Ah, Psyche! from the regions which
Are Holy Land!——”

In his prose writings he even maintains “that Beauty is the sole

legitimate province of the poet;" that "the pleasure which is at once the most intense, the most elevating, and the most pure," is to be found in the contemplation of the Beautiful—nay, he actually offers one of his productions as "this book of truths, not in the character of truth-teller, but for the beauty that abounds in its truth, constituting it true."

Unhappily he could find no satisfaction for so keen a sentiment, and became somewhat desperate in consequence:—

"Oh! I am sick, sick, sick, even unto death
Of the hollow and high-sounding vanities
Of the populous earth."

The melancholy tone of his poetry must be regarded as the effect of his melancholy view of life, but by no means as an unconscious effect. He considered a tone of sadness, as he informs us, to be the tone of the highest manifestation of beauty;—"Beauty of whatever kind, in its supreme development, invariably excites the sensitive soul to tears. Melancholy is thus the most legitimate of all the poetical tones." And his poetry is all most ingeniously, one might almost say, cunningly constructed in accordance with such a view. Does it not consist throughout of beauty and sorrow—of *Psyche* and of death, which is the greatest sorrow, "of all melancholy topics, what, according to the *universal* understanding of mankind, is the most melancholy?" "And when is this most melancholy of topics most poetical?" "When it most clearly allies itself to beauty. The death, then, of a beautiful woman is unquestionably the most poetical topic in the world; and equally is it beyond doubt that the lips best suited for such a topic are those of a bereaved lover." Hence *Psyche* is brought "in the lonesome October," with her wings "sorrowfully trailing in the dust," "by the dank tarn of Auber, in the ghoulishaunted woodland of Weir," until she is "stopped by the door of a tomb."

"By the door of a legended tomb;
And I said, 'What is written, sweet sister,
On the door of this legended tomb?'
She replied—'Ulalume, Ulalume—
'Tis the vault of thy lost Ulalume!'"

Hence also we hear of—

“The lilies there that wave,
And weep above a nameless grave.”

He embodied the spring blossoms of his life, his hopes and aspirations, which had all been blasted and wrecked, in the form of a beautiful woman, as the form most beautiful on earth; and this he chained to a vault, or otherwise represented under circumstances of intense gloom. In this way he blended the actual and the ideal in his poetry.

“My love, she sleeps! Oh, may her sleep
As it is lasting so be deep!
Soft may the worms about her creep!
Far in the forest dim and old,
For her may some tall vault unfold,” &c.

Gloomy gates open to disclose the beautiful statue of *Psyche*, and sorrow and “dying embers” in the “bleak December,” accompany “the rare and radiant maiden whom the angels name *Lenore*.”

“Ah! distinctly I remember, it was in the bleak December,
And each separate, dying ember wrought its ghost upon the floor.
Eagerly I wished the morrow—vainly I sought to borrow
From my books surcease of sorrow—sorrow for the lost *Lenore*—
For the rare and radiant maiden, whom the angels name *Lenore*,
Nameless here for evermore.

As he “nodded, nearly napping, suddenly there came a tapping” at his chamber door; and in steps a “stately raven of the saintly days of yore.” Passionate appeal then is his to this embodiment of utter hopelessness for “respite, respite and nepenthe from the memories of *Lenore*.”

“‘Prophet!’ said I, ‘thing of evil! prophet still, if bird or devil!
Whether Tempter sent, or whether tempest toss’d thee here ashore.
Desolate, yet all undaunted on this desert land enchanted—
On this home, by horror haunted—tell me truly, I implore—
Is there—is there balm in Gilead? tell me—tell me I implore!’
Quoth the raven, ‘Nevermore!’

“‘Prophet!’ said I, ‘thing of evil—prophet still, if bird or devil!
By that heaven that bends above us—by that God we both adore!
Tell this soul with sorrow laden, if, within the distant *Aidenn*,

It shall clasp a sainted maiden whom the angels name Lenore—
Clasp a rare and radiant maiden, whom the angels name Lenore!"
Quoth the raven, "Nevermore!"

A notable feature is the absence of anything sensual from Poe's poetry; the beautiful is as chaste as a statue; it is not Venus, "not even a lissome Vivien," but Psyche—always Psyche from the regions which are Holy Land. And this pure passion for the beautiful, so much above earth in its aspiration, which was inherent in him, would but tend, being rudely crushed, to increase his degradation, and to aggravate his remorse. Unhappily endowed being, probably few people have lived upon this earth as miserable as was Edgar Poe.

The genius of Poe lies in his keen sentiment of the beautiful; therein had he a glimpse into that "mystery of the universe, what Goethe calls 'the open secret;'" the possession of a faculty of insight into which, on one aspect or another, is necessary to constitute a man of genius. Dr. Johnson has said—"As among the works of nature no man can properly call a river deep or a mountain high, without the knowledge of many mountains and many rivers; so in the production of genius nothing can be styled excellent till it has been compared with other works of the same kind." But in adopting such a canon of criticism, it behoves us to be very careful that we do compare things of the same kind. It does not follow most certainly that, because we attribute genius to a man, we are justified in dragging forward his production and comparing it with that of any other man of genius, and, forthwith, being disappointed by the comparison, pronouncing him inferior. As well might we compare the lilac of the garden with the banyan of the forest. There are men of genius belonging, so to say, to different species, as well as trees of different species; and in the one case as well as in the other, one may be beautiful and pleasing to look at, and another mighty and useful to profit from. Heaven sends us both, and finds it not good to give to the laburnum the branches of the gnarled and knotted oak. The poet, the prophet, and the philosopher, the man of genius in any shape do, indeed, at bottom see but the same thing, and that what Fichte calls "the Divine idea which lies at the bottom of

all appearance ;" but they see it in different aspects. The poet sees the beautiful in it, the philosopher the true, and the prophet the good ; and yet the beautiful, the true, and the good are all aspects of one and the same. No man has genius who possesses not the faculty of seeing this in one form or another ; he may have talent, but talent dies with him. In his sympathy with the beautiful lies what of genius Edgar Poe had ; for we say nothing of the beauty of his language and of his melody here ; no other insight had he. His sorrow is nothing more than a morning headache after a night of intemperance, and his view of man's life and destiny upon earth is nothing more than a perverted vision—by reason of which he was incapacitated from seeing ought but the "tragedy man."

" And much of madness, and more of sin,
And horror the soul of the plot."

The question might arise for us at this stage, as to what view Edgar Poe entertained of man in the universe ; but, unhappily, as we have said, he does not appear to have been capable of any serious or comprehensive view at all ; merely felt that he was a very miserable creature with acute sensibility, and strong aspiration for something beautiful, for which he could by no means find satisfaction. In the conduct of his life, he made the important mistake of supposing that happiness was attainable by self-indulgence, instead of by self-denial, and acted accordingly. He sought his own pleasure, and never dreamed that the object of a man's life might be the happiness of others, and therein the greatest happiness to himself. So he flung down the dice with a deeper and deeper stake on each occasion, and lost more and more peace of mind, until he thought that the dice must be loaded, that a conspiracy existed against him on the part of society, and deemed the earth to be a "damned earth." And he poured forth his anger and his hatred together, with his sorrow for his lost love, and his blasted hopes, thus :—

" Ah, broken is the golden bowl ! the spirit flown forever !
Let the bell toll ! a saintly soul floats on the Stygian river ;
And Guy de Vere, hast thou no tear ;—weep now or never more !
See on yon drear and rigid bier low lies thy love, Lenore !

Come! let the burial rite be read—the funeral song be sung!—
An anthem for the queenliest dead that ever died so young—
A dirge for her the doubly dead, in that she died so young.

* * * * *

“Avaunt! to-night my heart is light—no dirge will I upraise,
“But waft the angel on her flight with psalm of old days!
“Let no bell toll! lest her sweet soul, amid its hallowed mirth,
“Should catch the note as it doth float up from the damned earth.
“To friends above from fiends below, the indignant ghost is riven—
“From Hell into a high estate far up within the heaven—
“From grief and groan, to a golden throne, beside the King of Heaven.”

We wonder not that so weak a mortal, seeing life only through his own morbid soul, could find therein nothing but madness and horror and sin. Better and stronger men have with earnest supplicating cry questioned destiny, to whom it has given but a doubtful reply. Oh, that my existence had been postponed for some thousands of years, might be the prayer, not altogether of a madman; that it might have been put off till the end was nearer at hand—that I had been born when some reasonable guess might have been made at the final purpose! Better would it have been than to live now, when desire is so intense yet without satisfaction, to have lived amongst the Titans, with Odin or with Thor; to have made bricks in Egypt, or to have defended the pass at Thermopylæ. But to be as it is—hemmed in by conventionalities, which are some of them manifestly not of eternity and heaven, but of time and the devil; madly thirsting after knowledge, but incapable of attaining it—it is difficult indeed to be calm and to steer aright. There is a just need of the rudder of a reasonable faith to enable a man to do so; a faith in God, rather than the devil, ruling the world. From certain passages in Poe's writings it might appear, were it legitimate in such way to draw conclusions, that his views were somewhat sceptical; that he had notable faith only in the “conqueror worm.” “The boundaries which divide life and death,” says he “are at best shadowy and vague. Who shall say where the one ends and the other begins? We know that there are certain diseases in which occur total cessations of all the apparent functions of vitality, and yet in which these cessations are merely suspensions, properly so called. They are only

temporary pauses in the incomprehensible mechanism; a certain period elapses, and some unseen mysterious principle again sets in motion the magic pinions and the wizard wheels. The silver cord was not forever loosed, nor the golden bowl irreparably broken. But where, meantime, was the soul?" And again in the conversation which the learned Doctor Pononner holds with the resuscitated Egyptian mummy, Count Allamistakeo, the following remarks occur: "But since it is quite clear," resumed the doctor, "that at least five thousand years have elapsed since your entombment, I take it for granted that your histories, at that period, if not your traditions, were sufficiently explicit on that one topic of universal interest, the Creation, which took place, as I presume you are aware, only ten centuries before?" "Sir?" said the Count Allamistakeo. The doctor repeated his remarks; but it was only after much additional explanation, that the foreigner could be made to comprehend them. The latter at length said, hesitatingly, "The ideas you have suggested are to me, I confess, utterly novel. During my time, I never knew any one to entertain so singular a fancy as that the universe (or this world, if you will have it so,) ever had a beginning at all. I remember once, and once only, hearing something remotely hinted, by a man of many speculations, concerning the origin of the human race; and by this individual, the very word *Adam*, (Red Earth) which you make use of, was employed. He employed it, however, in a general sense, with reference to the spontaneous germination from rank soil, (just as a thousand of the lower *genera* of creatures are generated,) the spontaneous germination, I say, of five vast hordes of men, simultaneously upspringing in five distinct and nearly equal divisions of the globe."

Such observations, however, are of no great import, since the character of Poe, as we see it in his writings and in the facts of his life, clearly makes manifest that, whether he were in the "everlasting no," or whether he had arrived at the "centre of indifference," he certainly had not attained to a knowledge of the "everlasting yea." Angry and envious, malignant and cynical, without sense of honor or love of his kind, he was utterly destitute of that faculty of reason-

able insight, by which a man sees in human life something more than what is weak, sinful, and contemptible. If a man determine to reject all creeds and dogmas, yet, if he have any power of vision, must he surely discover "eternal veracities" in the heaven, in the earth, and all that therein is; *feel* them as they are traced by the finger of Omnipotence day by day in his own moral experience. The highest development of scepticism can in the end, but arrive at this conclusion, that sin is ignorance; and if a man have the capability of knowledge in him, is he not responsible for such ignorance? If, however, he grasp at the present, forgetting the eternal, and hope to find pleasure or satisfaction in the fleeting things of time, he may say with Edgar Poe, dubiously and despairingly,

"I stand amid the roar
Of a surf-tormented shore,
And I hold within my hand
Grains of the golden sand—
How few! Yet how they creep
Through my fingers to the deep,
While I weep, while I weep!
O God! Can I not grasp
Them with a tighter clasp?
O God! Can I not save
One from the pitiless wave?
Is all that we see or seem
But a dream within a dream?"

There are many melancholy spectacles in the world, but, perhaps, none more melancholy and more pitiable than that of a man of genius howling out in his own weakness; a Byron shrieking curses to the listening stars; or a Poe doing evil, and angrily damning the punishment thereof. If a brave man struggling with adversity be a sight pleasing to the gods, surely the angels may weep over such a spectacle; for,

"Hell rising from a thousand thrones
Shall do it reverence."

There appears no further possibility of "explaining" Edgar Poe. We must accept the facts of his life, and in them we can only see the result of a fundamental constitutional fact, and an unhappy col-

temporary pauses in the incomprehensible mechanism; a certain period elapses, and some unseen mysterious principle again sets in motion the magic pinions and the wizard wheels. The silver cord was not forever loosed, nor the golden bowl irreparably broken. But where, meantime, was the soul?" And again in the conversation which the learned Doctor Pononner holds with the resuscitated Egyptian mummy, Count Allamistakeo, the following remarks occur: "But since it is quite clear," resumed the doctor, "that at least five thousand years have elapsed since your entombment, I take it for granted that your histories, at that period, if not your traditions, were sufficiently explicit on that one topic of universal interest, the Creation, which took place, as I presume you are aware, only ten centuries before?" "Sir?" said the Count Allamistakeo. The doctor repeated his remarks; but it was only after much additional explanation, that the foreigner could be made to comprehend them. The latter at length said, hesitatingly, "The ideas you have suggested are to me, I confess, utterly novel. During my time, I never knew any one to entertain so singular a fancy as that the universe (or this world, if you will have it so,) ever had a beginning at all. I remember once, and once only, hearing something remotely hinted, by a man of many speculations, concerning the origin of the human race; and by this individual, the very word *Adam*, (Red Earth) which you make use of, was employed. He employed it, however, in a general sense, with reference to the spontaneous germination from rank soil, (just as a thousand of the lower *genera* of creatures are generated,) the spontaneous germination, I say, of five vast hordes of men, simultaneously upspringing in five distinct and nearly equal divisions of the globe."

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location of circumstances. It seemeth good to the Ruler of the spheres to embody in human form now and then the various vices and weaknesses to which human nature is liable, and by the erratic and unhappy course thereof, to "teach the nations wisdom and the people understanding." It behoves us to look on, "more in sorrow than in anger;" rather than to curse, to pray with the Arabian philosopher, "O God! be kind to the wicked; to the good thou hast already been sufficiently kind, in making them good."

Alas! it is exceedingly difficult to accept calmly such an anomalous being as Edgar Poe. Is no explanation of him possible? Is the tragedy played out with no unity preserved therein? For the present it is; but the time will surely come, when Edgar Poe may be proved to have been legitimate, and no otherwise possible. Meanwhile the curtain falls.

"Out—out are the lights—out all!
And over each quivering form,
The curtain, a funeral pall,
Comes down with the rush of a storm,
And the angels all pallid and wan,
Uprising, unveiling, affirm
That the play is the tragedy, 'Man,'
And its hero, the Conqueror Worm."

BIBLIOGRAPHICAL.

Traité des Maladies Mentales. Par le Docteur B. A. MOREL,
Medecin en chef de L'Asile des Aliénés de St. Yon, (Seine Inférieure) etc. Paris: 1860.

THE work whose title we have given above is a closely printed octavo volume of 840 pages, and is designed by the author principally for the use of medical practitioners not specially engaged in the care and treatment of the insane. Dr. Morel is well known as the author of a treatise "On Degenerate Types of Man," in which he attempts to show that the human race constantly tends to deteriorate under the influence of the thousand adverse circumstances by which it is surrounded, and that under the continued action of these adverse influences, certain forms of degeneracy which, according to his view, are nothing else than "morbid deviations from the normal type of humanity," are gradually established. These forms of degeneracy all have their peculiar characters, impressed upon them by the action of the causes which have produced them, and tend, under the continued action of the same causes, to deviate more and more from the normal type, and to be perpetuated and aggravated by hereditary transmission.

Such is the dominant idea of the treatise on Degenerate Types, which has induced the author to create in the human species different morbid varieties, which, under the influence of the same causes of degeneracy, take on fixed pathognomonic characters, manifested in the intellectual, physical, and moral being. These he denominates the *fixed*, *immutable*, and *essential* characters which ought to serve as the basis of a classification of mental disorders, and which it is absolutely necessary to distinguish from those which may more properly be considered as accessory or accidental.

The present work is the result of the application of the doctrine

of degenerate types to the study of mental disorders, in regard to which the author considers the principle fully established : 1st, "that when this disease (insanity) is the result of morbid phenomena transmitted by heredity, it constitutes a true condition of degeneracy ; and, 2nd, that when it occurs primarily, there is every reason to fear that, in the generations following, it will also be manifested in the deterioration of the offspring, and, finally, by the extinction of the family."

In addition to the action of hereditary transmission in producing that form of degeneracy of which insanity is the result, the author has shown "that the influence of soil, climate, and hygiene, and of certain localities, such as those of densely populated towns, and of depraved habits, such as intemperance, may, either alone or in connexion with heredity, originate morbid types, presenting perfectly distinct characters of the moral and intellectual as well as of the physical order." The last he designates as the external, physical signs, the *stigmata* of heredity. They are presented under the form of unsymmetrical crania, deformities of the ears, diminutive stature, want of development of the reproductive organs, and various congenital defects and deformities, such as club-foot, strabismus, rachitis, etc. In regard to hereditary mental disorders, he expresses the following views :—

"In observing the connexion and reciprocal dependence of the morbid phenomena transmissible by heredity, I have been induced to create the great and important class of hereditary insanity. I have proved that from the slightest eccentricity of conduct, from the slightest disorder of the moral sensibility, designated by the name of moral insanity, (*manie raisonnée*) down to those states known as imbecility, idiocy, and cretinism, there exist different degrees of one and the same affection. The observation of cases of morbid heredity has convinced me that these different degrees constitute distinct classes, the individuals composing which are the natural representatives of pathological phenomena transmitted hereditarily."—(p. 4.)

The classification of insanity proposed by Dr. Morel differs from all those that have preceded it, in being based upon the etiology of the disease, and the fixed and intimate connexion that exists between the nature of the cause and the character of the symptoms produced. The different forms of insanity entering into this classification "all

have their characters peculiar to each, their course is well marked, and their prognosis invariable. The insane delusions and conduct differ in each of these forms, which are all distinguished by the diversity of curative indications, and by the variety of pathological lesions." As the author's views on the subject of insanity generally are embodied in this classification, we cannot give a better idea of the character of the work than by the following synopsis, in which we follow nearly the author's own language :—

FIRST GROUP : HEREDITARY MENTAL DISORDERS.

This group is divided into four classes.

The first class includes a large number of persons in whom the nervous temperament, by virtue of numerous hereditary transmissions, is congenital. These persons are more liable than others to become insane. They readily become delirious under various circumstances, and the neuropathic conditions transmitted by heredity, subject them to attacks of insanity from apparently the most trifling causes.

In the second class, insanity is manifested rather by the actions than by the language. The patients composing it are noted for their eccentricities and incoherence, for the irregularity and often for the gross immorality of their conduct. Certain remarkable intellectual qualities do not redeem them from the impossibility of directing their energies to any thing useful. Their inventions are few, and are seldom productive of any result. Their genius is one-sided, and, in spite of occasional brilliant efforts, they are smitten with intellectual and sometimes with physical sterility. In this class are placed a multitude of visionaries, of reformers and utopians of all kinds, of inventors whose discoveries are impossible of application, or who pursue the verification of problems incapable of solution. The dangerous acts which they commit in their paroxysms of madness, often call for the interference of the law, which orders their sequestration. Their attacks of mania are of short duration, and in the intervals they retain the essential characters of their malady, systematic delirium, (*delire systematique*) and ambitious tendencies, with the ab-

sence of general paralysis ; and they astonish superficial observers by the apparent integrity of their reasoning powers, (*manie raisonnée*, moral insanity of the English). In regard to their physiological functions no less striking anomalies may be remarked. To extreme nervous irritability, and a tendency to become insane from very slight causes, they join a special aptitude for excesses of all kinds, such as prolonged vigils, abstinence from food, and unbridled sexual excesses. The signs of degeneracy are most commonly manifested in these patients by irregularities in the conformation of the cranium, and by anomalies in the generative functions. It has been observed that they are sometimes sterile, and that in all cases their offspring are feeble, and frequently die young. They show their genital incapacity by affecting passions impossible to realize, and sometimes, also, by the deprivation of their natural instincts.

The third class forms the transition between patients of the second category, and those who are placed in the lowest scale of physical degeneracy, and who are commonly known as *simple-minded, imbecile, or idiotic*. Among the insane of the third class, the signs of hereditary transmission are manifested from the earliest infancy, by their intellectual dullness, and by the excessive depravity of their moral tendencies. They learn with difficulty and forget quickly. Sometimes, however, they manifest special dispositions for the arts, but they want absolutely the power of co-ordinating their ideas. Their innate tendencies to evil have given to their disease the name of *instinctive mania*. Arson, theft, dissipation, and every proclivity to all kinds of vice, form the sad inventory of their moral existence, and these unhappy beings, who seem to have been formed with a view to neither physical nor moral perfection, and who are in consequence the most complete representation of evil hereditary influences, furnish a large portion of the population of prisons and reformatory institutions for youth.

The signs of physical degeneracy, such as faulty conformation of the cranium, diminutive stature, sterility, or, in most cases at least, difficulty of propagating their species, are more evident in patients of this class than in those of the preceding.

The fourth class comprises the simple-minded, the imbecile, and the idiotic.

It has been hitherto the general custom to comprise under these names the degraded beings whose place is well defined in the great family of degenerate types. Not that all their depraved tendencies are acquired by hereditary transmission ; in other words, it cannot be stated without some limitation, that the vices and intemperance of the parents, and that which the author has termed the double entailment of physical and moral degradation, determine exclusively the intellectual, physical, and moral condition of the class now under consideration. Morbid conditions of the fourth class are sometimes connected with hereditary transmission through ties which the parents have unwillingly formed. It has been seen in fact that morbid conditions unknown to the parents, fright experienced by the mother during her pregnancy, poverty, insufficient nourishment, convulsions during infancy, blows upon the head, and other mechanical injuries, may produce the unhappy and often irremediable condition of patients of this class. However this may be, if these patients are compared with other cases of hereditary insanity, the distinctive characters are strongly marked. Deprived alike of all intellectual spontaneity, they present considerable differences in their moral development. If there are some in whom the knowledge of the difference between right and wrong may be admitted, the greater number are completely passive, and irresponsible in the highest acceptation of the term.

Finally, individuals of the last category have a typical expression, which is the most satisfactory proof of the existence of morbid varieties of the human species.

SECOND GROUP : INSANITY CAUSED BY INTOXICATION.

The forms of insanity produced by various poisonous agencies, are divided into three classes.

The first class includes those forms which are caused by narcotics employed for procuring factitious sensations. When narcotics, such as alcohol and opium, which the customs of different nations have

sanctioned for procuring factitious sensations, are habitually used, there result special forms of aberration, and the precise lesions of the nervous system present, in the end, the same characters in all persons exposed to the same cause. The children, moreover, who are born in certain conditions of chronic alcoholism of the parents, present the characters of degenerate types. Other substances, such as lead, phosphorus, and mercury, may be studied from the same point of view. The continued exposure to the influence of these different substances, acts injuriously on the nervous system, alters the constitution, gives rise to special mental disorders, and is productive of fatal results, such as convulsions and paralysis.

The second class is that of cases caused by insufficient or unwholesome food. When the general conditions of alimentation are changed, and when the substances which form its basis are spoiled, aberrations from the healthy standard are observed, which are manifested, in the first place, under the form of progressive mental deficiency, and the deterioration of the people; and, in the second, under that of special nervous disorders, delusions, hallucinations, and tendency to suicide. The different nervous epidemics which have prevailed in times past under the names of ergotism, St. Anthony's fire, (*mal des ardents*) &c., are owing to these causes, and it is probable that pellagra, which is characterized by cachexia, and extreme depression of the digestive and nutritive functions, is due to causes of the same nature.

The third class is connected with malarious influences, and the geological formation of the soil. The ill health of persons living in marshy situations, their premature old age, the diseases to which they are subject, and which frequently prove fatal, are at the present day well known. The effects produced by other conditions of the soil—effects to which other degenerate types may be attributed, such as cretinism for example—are perhaps not so generally appreciated. This is an affection in fact which impresses its subjects with a special, typical character, which fixes a distinct line of demarcation between cretinism and other degenerate types, such as imbecility and idiocy, and which, as has been seen already, are rather owing to he-

hereditary transmission than to the special influences of a locality where an endemic cause of degeneracy exists.

THIRD GROUP: INSANITY CAUSED BY THE TRANSFORMATION OF CERTAIN NEUROSES; HYSTERICAL, EPILEPTIC, HYPOCHONDRIACAL INSANITY.

The first class is that of hysterical insanity. This form of insanity presents the most characteristic aberrations in respect of the temperament of the hysterical and special disorders of the affective faculties among this class of patients, as well as pathological changes which are wrought in them. The highest excitement may be followed by the most extreme depression. Hallucinations and disordered sensations, extravagant delusions, rapid transitions from one nervous state to another, extraordinary remissions with apparent return of reason in some cases, tendency to suicide, to arson and all kinds of evil conduct in other phases of the malady, and, finally, deplorable conditions, in which human nature is seen under its most degraded aspects, form the principal characters of the transformation of a neurosis, which a German writer has aptly named *neuropathia psychica sexualis*. It must be remarked, that in this form of insanity the ordinary symptoms which are observed in hysteria proper have disappeared. Ecstasy, catalepsy, anæsthesia, paraplegia, and the whole train of nervous disorders which usually accompany hysteria, are absent. Hysterical insanity is a transformed neurosis, in the most rigorous sense; but the symptoms of this form of insanity are so characteristic, that the profession will readily accept this special form, which allows their natural place to be assigned to these affections which, neither in a pathological nor medico-legal point of view, have found their place in the ordinary classification of mental diseases.

The second class is that of epileptic insanity. The maniacal fury to which epileptic attacks in some cases give rise, the character of the hallucinations of these patients, the suddenness of their acts of aggression, the exaltation of the religious sentiment in some instances, render epileptic insanity one of the most serious and dangerous in the

catalogue of mental disorders. Epileptic insanity also stamps upon the neurosis from which it is derived its characters of periodicity, of acuteness and of remission, and its termination is generally fatal.

Hypochondriacal insanity constitutes the third class of the group of transformed neuroses, and is divided into three varieties.

The first variety is simple hypochondriasis. In this class individuals are included who, occupied almost exclusively with the subject of their physical health, constitute that numerous class of patients who become the torment of their physicians, but who can not still be considered as insane. It is, nevertheless, in this category that persons are found who, while in the fulfillment of their ordinary social duties, or occupying important positions, begin to make themselves remarked for their oddities and singularities, and by habits which are at variance with their former way of life, and with common usage. In this class will be found eccentric and discontented characters, who have in consequence of their suffering condition acquired the disposition to isolate themselves, and adopt singular habits. The infinite variety of characters in modern society, which are easily understood when differences of manners and of habits, and the various aims of life and degrees of civilization are considered, establish differences in this respect, the philosophical study of which comprehends numerous types. The only point which they have in common is, how far disease is capable of uniting so many different forms in one single type, recognizable by the tendencies of individuals, and by the similar morbid changes through which they pass. Another important consideration, is the powerful hereditary transmission of this neurosis. Not that the children of hypochondriacs shall be attacked by precisely the same affection, but a congenital tendency may be remarked which shall ultimately be manifested, sometimes by intellectual feebleness, sometimes by melancholic tendencies, which contain the germ of the insanity of persecution (*delire des persecutions*), the second variety of the class under consideration.

The transition to the second variety is indicated by that singular mental condition, in which the patients seem to be less occupied about their physical health than with concerns of a higher order, their

honor, their reputation, and whatever belongs to the dearest interests of life. The "insane by persecution," constitute a numerous class of mental maladies, and the dangerous acts which they sometimes commit are in correspondence with the state of suffering which they endure. Under this head special forms of homicides and suicides, and madmen of the most dangerous description are classed. Patients of this variety, having all the outward appearance of reason, have been known to commit the most incredible acts, such as theft, arson, or homicide, with the single object of attracting public attention, and thus obtaining that justice which, in their insane delusions, they pretend has been denied them.

When the disease tends to a fatal termination a no less extraordinary change supervenes in the ideas and sentiments of the "insane by persecution," which constitutes a third variety of this form of insanity. Patients have been met with who, after passing through the various phases of "insanity by persecution," under the influence of new organic modifications, believe themselves called to fulfill a great destiny, and to act a part for which they are fitted neither by their education nor by their intellect. It has been said that these symptoms indicate a fatal termination, but this prognosis is not invariable.

FOURTH GROUP: IDIOPATHIC INSANITY.

As the brain is liable to be affected by sympathy with various disorders of the circulatory, digestive, and respiratory systems, and with troubles in the different physiological functions, such as menstruation, pregnancy, childbed, lactation, etc., so it is also subject to diseases and injuries of its own structure, which unfit it for the proper performance of its functions, and give rise to various disordered manifestations, and different degrees of intellectual impairment. These are periodic congestion, hemorrhage, meningitis, softening, atrophy, wounds, blows, falls, etc. The mental disorders and impairment which result from these various lesions constitute the fourth group, which is divided into two classes.

The first class is that of progressive impairment or extinction of

the intellectual faculties, the consequence of chronic diseases of the brain or of its membranes. If cerebral congestions or hemorrhage, or the other lesions which have been mentioned, may give rise to acute mania, it is also the case, generally, that chronic conditions of the same affections bring on a state of dementia, which presents no evidence of any special mental disturbance; the principal symptoms being a progressive impairment of the reasoning powers, with loss of memory and of the affective faculties, in a word, the supremacy of the vegetative life over the life of relation.

The author considers it an error which some nosologists have committed, to exclude all these conditions from the catalogue of mental disorders, for the reason that the delusions and insane impulses which are commonly met with in ordinary insanity are wanting. But the dementia of these cases, though divested of all remains of excitement and insane delusions, in the origin of the disorder was preceded by acute symptoms with disturbance of the intellect, and it is not in accordance with the principles of correct classification to separate the terminative from the primitive forms of a disease.

The second class includes general paralysis, paralytic insanity with predominance of delusions of grandeur.

The determining causes of this affection, as Dr. Parchappe has justly observed, are of the number of those which provoke a powerful and continued over-excitement of the brain; such as sensual excesses, especially the use of alcoholic drinks, of good cheer, and of venereal indulgences; and of intellectual excesses, represented by prolonged vigils, by the anxieties of business, of hazardous speculations, and of unrequited labor. But to obtain a correct idea of this disease, so well characterized by the nature of the ambitious mania, it is highly necessary, after having studied the intimate relations which exist between the form of insanity and the nature of its cause, to consider the element of the cerebral lesion. In paralytic insanity the lesion, which is nothing less than inflammatory softening of the cortical layer of both cerebral hemispheres, gives to the disease its peculiar character, and renders it certainly one of the best characterized diseases in the catalogue of mental maladies.

FIFTH GROUP : INSANITY BY SYMPATHY.

This group includes all those cases in which insanity results from sympathy of the organ of thought with irritation or diseased action in some other portion of the system ; as examples of which the author instances affections of the heart and lungs, verminous affections, suppressed menstruation, uterine irritation, &c. Insanity arising from these causes is not divided into classes according to the nature and locality of the primary disease which excites the sympathetic action of the brain, for the reason that the mental disorder frequently remains as an independent affection after the cessation of the original disorder which called it into existence, and consequently enters of its own right into one of the divisions of the general classification of mental disorders, " according to which, as experience proves, the persistence of the mental disorder depends upon one of the *radical, essential causes*, which have been designated under the names of hereditary predisposition, neurosis, intoxication, idiopathic affections of the brain, etc., and which impose upon all who have been subjected to their action common characters, recognizable by external and internal signs."

SIXTH GROUP : DEMENTIA.

The author thinks best to retain this designation, because it is sanctioned by legislation, though in a different sense from that in which it is used in medicine. Dementia is not properly a primitive form, it is rather a terminal state ; but since it happens that dementia, whatever may have been the primitive form of the mental disorder, constitutes a numerous family, the members of which all have a common character and are recognized by well known, internal and external signs, he thinks that the order and method which he seeks to establish in the study of mental disorders, will suffer nothing by a classification which makes of dementia so important a form of insanity.

In regard to the use of the terms mania and melancholia, to designate primitive forms of insanity, the author considers mania (excitement) and melancholia (depression) merely as symptoms, which are

the intellectual faculties, the consequence of chronic diseases of the brain or of its membranes. If cerebral congestions or hemorrhage, or the other lesions which have been mentioned, may give rise to acute mania, it is also the case, generally, that chronic conditions of the same affections bring on a state of dementia, which presents no evidence of any special mental disturbance; the principal symptoms being a progressive impairment of the reasoning powers, with loss of memory and of the affective faculties, in a word, the supremacy of the vegetative life over the life of relation.

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common to all varieties, and which, therefore, cannot be entitled to rank as essential forms of the disease. Further than this he does not object to these designations, which he says ought to be preserved.

"The words 'maniacal excitement,' 'melancholic depression,' 'mania,' 'melancholia,' are frequently formed under my pen when I am engaged in describing the different phases of this or that form of insanity, entering into the classification which I have adopted, but once more I would remark, these symptoms are only transitory phenomena, which commonly alternate with each other. Thus whenever I employ the words mania, melancholia, it will be understood that I merely refer to certain phases of mental disorder, in which the symptoms of excitement or depression are predominant. I do not mean to indicate by their use special forms of insanity. I only describe one of the symptoms of a determinate form of mental disorder."

In regard to the character of the work under notice, we do not hesitate to express our conviction that the profession owes a lasting debt of gratitude to Dr. Morel, for the manner in which he has set forth and maintained his views upon the subject of insanity. We believe that all the classifications of mental disorders which have thus far been presented, have proved unsatisfactory from the fact that they have been based too exclusively on mental states, on the extent to which the mind has appeared to be disordered in its thinking or affective faculties, or on the particular propensity which has manifested a morbid activity. While our attention has been so much given to the mental manifestations, we have acted too much as though we regarded insanity as a disease of the mind itself, and, in our nomenclature of the disease, have treated the physical conditions accompanying it as almost of no account. While we have really looked upon the mental disorder as only symptomatic, and a vast amount of labor and research have been expended in endeavors to ascertain the precise lesion of the organ of thought to which it ought to be attributed, it has never occurred, we believe, to any pathologist before Dr. Morel, to seek for degenerate or defective conditions in other portions of the animal structures with which insanity might be associated, and which might serve, in connection with the

mental phenomena, as a basis of classification. That the mental manifestations, especially those of excitement and depression, are insufficient as the basis of a correct classification of mental disorders, is sufficiently evident, from the fact that they are essentially wanting in the elements of permanency and fixedness, that they frequently alternate with each other in the course of the disease, and that they have no connection with any definite pathological lesions, or permanent physical condition. The classification proposed by Dr. Morel, on the other hand, has this advantage; that each of the varieties which he makes of mental disorders, is based upon well defined and permanent mental states, which are always found in connection with certain conditions of the physical organism, and can always be traced to causes which differ in the different forms, but are always identical in the same morbid variety. It also has the merit of doing away with the confusion which has been introduced into the nomenclature of insanity by the use of such terms as pyromania, kleptomania, dipsomania, &c., which, by bringing into prominence a single symptom, have caused others of equal or greater importance to be overlooked, and have thus given erroneous ideas of the nature of the cases to which these names have been applied. It assigns a definite position to certain obscure and scarcely recognized forms of mental disorder, accompanied by depraved moral tendencies in early life, and by showing that they are connected with states of physical degeneracy, and are due to causes that can be readily traced, gives them a status which has not heretofore been accorded them.

We believe that the doctrine which teaches that necessary and intimate connection between the character of mental disorders and the nature of the producing cause, is entirely original with the author. Such a doctrine, it seems to us, tends to give clearer views of the nature of insanity itself, and of the means to be employed in its curative, and especially in its preventive treatment, and we cannot too earnestly recommend Dr. Morel's treatise, together with the views it inculcates, to the attention of all who are interested in the subject of insanity.

On Obscure Diseases of the Brain and Disorders of the Mind: their Incipient Symptoms, Pathology, Diagnosis, Treatment, and Prophylaxis. By FORBES WINSLOW, M. D., D. C. L., OXON, &c., &c. London: John Churchill. 1860.

It is a most striking fact, and one not easy of explanation, that, as compared with other divisions of medical science, the field of cerebro-mental disorders has not received that general and thorough investigation which its importance demands. If this has been supposed to justify the publication of any however insignificant contribution to the knowledge of mental disease, how much the more shall we welcome the appearance of a treatise like the present. Ranking among the first medical philosophers of the age, a scholar of extensive research and original investigation, famous as a lecturer and writer upon mental and legal medicine, and of large experience in the treatment of cerebral disorders, it is indeed fit that Dr. Winslow should seek, as an author, to give a permanent form to the various accumulations of an extended career. We can, at least partially, comprehend the peculiar difficulties of such an undertaking, in the department which we are considering. Here credible experience has not yet taken shape in the form of accepted theories, and it needs constantly to be invoked and presented anew. Pertinent and reliable facts have still to be sifted from the crude mass of general statements, and no real progress can be made except under the combined light of all that the history of mental medicine will afford. Thus it does not surprise us that before the main results of such a task are presented, a volume should be devoted to the setting forth of the various sources, in logic or in fact, of the principles and practical deductions afterward to be given. Through such an antepast the student will be better prepared to assimilate the rich provision which is to follow. He will in this way approach the abstruse questions of psychology with whatever can be communicated of the author's wealth of learning and experience.

Considerations like these, we may suppose, have determined the preparation of the present volume. It is in fact an introduction to two elaborate works, dividing between them the entire field of cerebro-mental disorder, which are soon to be published. One of these will treat of "Organic Affections of the Brain;" the other of "Disorders of the Intelligence, Cerebro-Psychical in their nature." This explanation is of course a sufficient apology offered for "the somewhat cursory manner" in which the more practical bearings of the subject are presented. It will also serve to excuse a diffusive style, and an irregular method.

The reader is first invited to consider the various "morbid phenomena of intelligence," as they are displayed in the incipient, and in the several succeeding stages of mental disease. At the outset of this examination some speculations concerning the nature and limitation of insanity are indulged in, but there is no attempt to answer the questions raised. The object is chiefly to illustrate this branch of the subject by the detail and analysis of typical cases. That any satisfactory final result can be obtained by this method is not to be expected, but, under proper conditions, no doubt the symptomatology of insanity may be studied with much advantage. These conditions, however, from the very nature of the disorder, it is not easy to secure. Fragments of cases leaving out altogether important classes of facts, and wonderful histories in the form of autobiography or romance, are indeed freely communicated; but no large number of representative cases, which shall be at once complete and reliable, can be collected without the greatest difficulty. The success with which this task has been performed in the present volume must, we think, be considered creditable, even to the extensive literary research and acute critical knowledge of Dr. Winslow. At least three-fourths of the book are made up of these histories, drawn from the most various sources, yet carefully chosen to illustrate every form and symptom of mental disorder. Many of these, of course, are not new to the specialist, but they are not the less valuable in their place. Some are more lengthy than might be desired, for their purpose. In a few certain particulars, naturally inferred from the general facts of the case, have been incor-

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rectly stated. An instance of this is found in a specimen of verse, quoted in a foot-note* to exhibit a power of elevated and sustained thought in the mind of one "confined in the State Asylum, Utica, U. S. A.," and which is considered "interesting as proceeding from the pen of a man in an unquestionable state of mental derangement." The case was that of a thoroughly depraved drunkard, who had never been insane, and the lines, idly and carelessly composed, are quite unworthy of the really gifted and cultivated mind of the writer.

After exhibiting the premonitory symptoms of insanity, the mental condition during the attack, and, finally, the stage of convalescence, by the histories and autobiographies of patients, the subject is again presented from a different point of view. The stages of consciousness, of exaltation, of depression, of aberration, and of mental impairment, are separately considered, and illustrated by numerous cases.

Dr. Winslow takes every proper occasion here, as elsewhere in his writings, to rebuke that unrestricted use of the term insanity, which would make it cover almost every manifestation of a vicious nature. His labors have been so eminent and so successful in legal medicine, that we shall best serve our readers by quoting at length upon this point :—

"In the ordinary practice of medicine we occasionally meet with cases of *bodily* disease which are at variance with past experience and *à priori* notions, set at defiance preconceived views of morbid *physical* phenomena, resist every attempt to embody them within the *nosological* chart, and repudiate all reduction to any of the acknowledged orthodox, pathological standards or tests. These affections are anomalous or *pseudo* in their character, are with difficulty defined, not easily diagnosed, occasionally altogether escape observation, and often resist, too successfully, the operation of the best-directed remedial measures.

"If, among the diseases more particularly implicating the ordinary organic functions, we witness these pseudo or eccentric deviations from the recognized pathological character, *à fortiori*, are we not justified in anticipating that in the subtle, complicated, varied, and often obscure affections of the cerebral structure, deranging the operations of thought, we should have brought within the sphere of our

* See page 31.

observation extraordinary, anomalous, and eccentric deviations from certain predetermined, morbid, cerebral, and psychical conditions?

"I presume it to be a generally admitted axiom that the mind may be *disordered* without being *insane*, using this phrase in its strictly legal acceptation. These conditions of morbid intellect may be considered by some as only degrees of *insanity*; but I would suggest that this term be restricted to those mental disorders, accompanied with positive loss of control, clearly justifying the exercise of moral restraint, and to those morbid conditions of the intellect which sanction an appeal to the protective influence of the law. In other words, I would confine my remarks to those cases in which the mind may be said to be *pathologically* disordered, but not invariably *legally* insane.

"Have we in practice sufficiently appreciated this distinction? Fearful of committing ourselves to an opinion that might authorize an interference with the free agency of the patient, and justify the use of legal restraint, there has existed an indisposition to admit the presence of positive mental disorder, even in cases where it has been obviously and painfully apparent. This excessive caution—originating in motives that do honor to human nature—has often, I fear, been productive of serious, fatal, and irremediable mischief.

"The subject under consideration is one, I readily admit, of extreme delicacy, but, nevertheless, of incalculable importance to all sections of the community. It is, I admit, beset with difficulties and surrounded by dangers. In the hands of the inexperienced, the ignorant, indiscreet, and the wilfully designing, the facts that I have to record, and principles which I am about to enunciate, might be productive of much mischief; but, I ask, ought any apprehensions of this nature to deter the philosopher from entering upon so important an inquiry?

"The subject of latent and unrecognized morbid mind is yet in its infancy. It may be said to occupy, at present, untrodden and almost untouched ground. What a vast field is here presented to the truth-seeking observer, who, to a practical knowledge of human nature, adds an acquaintance with the higher departments of mental and moral philosophy, as well as of cerebral pathology. How much of the bitterness, misery, and wretchedness so often witnessed in the bosom of families arises from concealed and undetected mental alienation! How often do we witness ruin, beggary, disgrace, and death result from such unrecognized morbid mental conditions! It is the canker worm gnawing at the vitals, and undermining the happiness of many a domestic hearth. Can nothing be done to arrest the fearful progress of this moral avalanche, or arrest the course of the rapid current that is hurling so many to ruin and destruction?

"This type of morbid mental disorder exists to a frightful extent in real life. It is unhappily on the increase, and it therefore behoves

the members of the medical profession, as guardians of the public health, as philosophers engaged in the loftiest and most ennobling of human inquiries, as practical physicians called upon to unravel the mysterious and complicated phenomena of disease, and administer relief to human suffering, fearlessly to grapple with an evil which is sapping the happiness of families, and to exert their utmost ability to disseminate sound principles of pathology and therapeutics upon a matter so intimately associated and so closely interwoven with the mental and social well-being of the human race.

"These unrecognized morbid conditions most frequently implicate the *affections, propensities, appetites, and moral sense*. In many instances it is difficult to distinguish between normal or healthy mental irregularities of thought, passion, appetite, and those deviations from natural conditions of the intellect, both in its intellectual and moral manifestations, clearly bringing those so affected within the legitimate domain of pathology. Are there any unfailing diagnostic symptoms by means of which we may detect these *pseudo-forms* of mental disorder with sufficient exactness, precision, and distinctness to justify the conclusion that they result from diseased cerebral conditions? This question it will be my duty to consider. The phases of mind of which I speak are necessarily obscure, and, unlike the ordinary cases of mental aberration of every-day occurrence, they frequently manifest themselves in either an exalted, depressed, or vitiated state of the moral faculties. The disorder frequently assumes the character of a mere exaggeration of some single predominant passion, appetite, or emotion, and so often resembles, in its prominent features, the natural and healthy actions of thought, either in excess of development or irregular in its operations, that the practised eye of the experienced physician can alone safely pronounce the state to be an abnormal one. I do not refer to ordinary instances of eccentricity, to idiosyncrasies of thought and feeling, or to cases in which the mind appears to be absorbed by some one idea, which exercises an influence over the conduct and thoughts quite disproportionate to its intrinsic value. Neither do I advert to examples of natural irritability, violence, or passion, coarseness and brutality, vicious inclinations, criminal propensities, excessive caprice, or extravagance of conduct, for these conditions of mind may, alas! be the natural and healthy operations of the intellect. These strange phases of the understanding, *bizarries* of character, vagaries of the intellect, singularities, irregularities, and oddities of conduct, common to so many who mix in every day life, and pass current in society as healthy-minded persons, present to the moralist and philosophical psychologist many points for grave contemplation and often suspicion. Such natural and normal, although eccentric states of the intellect, do not, however, legitimately come within the province of the *physician* unless they can be clearly demonstrated to be *morbid results*, and

positive and clearly established deviations from cerebral or mental health.

"These forms of unrecognized mental disorder are not always accompanied by any well-marked disturbance of the bodily health demanding medical attention, or any obvious departure from a normal state of thought and conduct such as to justify legal interference; neither do these affections always incapacitate the party from engaging in the ordinary business of life. There may be no appreciable morbid alienation of affection. The wit continues to dazzle, and the repartee has lost none of its brilliancy. The fancy retains its playfulness, the memory its power, the conversation its perfect coherence and rationality. The afflicted person mixes as usual in society, sits at the head of his own table, entertains his guests, goes to the stock-exchange, the counting house or bank, and engages actively in his professional duties, without exhibiting evidence, very conclusive to others, of his actual morbid mental condition. The change may have progressed insidiously and stealthily, having slowly and almost imperceptibly induced important molecular modifications in the delicate vesicular neurine of the brain, ultimately resulting in some aberration of the ideas, alteration of the affections, or perversion of the propensities and instincts.

"The party may be an unrecognized monomaniac, and, acting under the despotic influence of one predominant morbid idea, be bringing destruction upon his home and family. His feelings may be perverted, and affections alienated, thus engendering much concealed misery within the sacred circles of domestic life. His conduct may be brutal to those who have the strongest claims upon his love, kindness, and forbearance, and yet his mental malady be undetected. He may recklessly, and in opposition to the best counsels and most pathetic appeals, squander a fortune, which has been accumulated after many years of active industry and anxious toil. He may become vicious and brutal, a tyrant, a criminal, a drunkard, a suicide, and a spendthrift, as the result of an undoubtedly morbid state of the brain and mind, and yet pass unobserved through life as a sane, rational and healthy man.

"We witness in actual practice all the delicate shades and gradations of such unrecognized and neglected mental alienation. It often occurs that whilst those so affected are able to perform, with praiseworthy propriety, scrupulous probity, and singular exactness, most of the important duties of life, they manifest extraordinary and unreasonable antipathies, dislikes, and suspicions against their dearest relations and kindest friends. So cleverly and successfully is this mask of sanity and mental health sometimes worn; so effectually is all suspicion disarmed, that mental disorder of a dangerous character has been known for years to progress without exciting the slightest notion of its presence, until some sad and terrible catastrophe has

painfully awakened attention to its existence. Persons suffering from latent insanity often affect singularity of dress, gait, conversation, and phraseology. The most trifling circumstances stimulate their excitability. They are martyrs to ungovernable paroxysms of passion, are inflamed to a state of demoniacal furor by insignificant causes, and occasionally lose all sense of delicacy of feeling and sentiment, refinement of manners and conversation. Such manifestations of undetected mental disorder are often seen associated with intellectual and moral qualities of the highest order. Neither rank nor station is free from these sad mental infirmities. Occasionally the malady shows itself in an overbearing disposition. Persons so unhappily disordered, browbeat and bully those over whom they have the power of exercising a little short-lived authority, and, forgetting what is due to station, intelligence, reputation, and character, become within their circumscribed sphere petty tyrants, aping the manners of Eastern despots. They are impulsive in their thoughts, often obstinately, unreasonably, and pertinaciously riveted to the most absurd and outrageous opinions, dogmatic in conversation, and litigious, exhibiting a controversial spirit, and opposing every endeavor made to bring them within the domain of common sense and correct principles of ratiocination. All delicacy and decency of thought are occasionally banished from the mind, so effectually does the spiritual principle in these attacks succumb to the animal instincts and passions.

"The naturally gentle, truthful, retiring, and self-denying, become quarrelsome, cunning, and selfish—the diffident bold—the modest obscure. We frequently observe these *pseudo-maniacal* conditions giving undue prominence to a particular faculty, or seizing hold of one passion or appetite. Occasionally it manifests itself in a want of veracity, or in a disposition to exaggerate, and tell absurd and motiveless lies. It may show itself in a *disordered volition*, in *morbid imitation*, in an inordinate vaulting ambition, an absorbing lust of praise, an insane craving for notoriety. The disorder occasionally manifests itself in a depressed, exalted, or vitiated state of the reproductive function; in morbid views of Christianity, and is often connected with a profound *anæsthesia* of the moral sense. Many of these sad afflictions are symptomatic of unobserved, and, consequently neglected cerebral conditions, either originating in the brain itself, or produced by sympathy with morbid affections existing in other tissues in close organic relationship with the great nervous centre.

"The majority of these cases will generably be found associated with a constitutional predisposition to insanity and cerebral disease. These morbid conditions are occasionally the sequelæ of febrile attacks, more or less implicating the functions of the brain and nervous system; they also often succeed injuries of the head inflicted in early childhood. Modifications of the malady are unhappily seen

allied with genius. The biographies of Cowper, Burns, Byron, Johnson, Pope, and Haydon, establish, that the best, exalted, and most highly gifted conditions of mind do not escape unscathed. In early childhood, this form of mental disturbance may, in many cases, be detected. To its existence may often be traced the motiveless crimes of the young, as well as much of the unnatural caprice, dullness, stupidity and wickedness often witnessed in early life at our great schools, and national institutions."

The wealth of information in regard to lesions of the intellect presented in this part, our limits oblige us to pass by with the merest reference. It is the most original and interesting portion of the book, and from it we may infer the value of the more methodical treatise to which it is the introduction.

The division comprising the morbid phenomena of motion, sensation, and the special senses, is full of interest, but contains, perhaps, less new matter than that which precedes. It, however, considers critically the latest investigations in cerebral pathology, and is a useful resumé of the subject.

Dr. W. gives great importance to the relations of sleep and insanity. From this part we take the following :—

"There is no symptom, when viewed in relation to the health of the brain and mind, that requires more careful and unremitting attention than that of insomnia, or wakefulness. It is one of the most constant concomitants of some types of incipient brain disease, and in many cases a *certain forerunner of insanity!*

"It is an admitted axiom in medicine, that the brain cannot be in a healthy condition whilst a state of sleeplessness exists. Sound, continuous, unbroken, regular, and uninterrupted sleep are essential to the preservation of the mental and bodily health. Any interference with this important function or state of cerebral rest, seriously damages the health of both body and mind.

"We cannot too zealously guard against, or too anxiously watch for, the first approaches of this characteristic symptom of incipient brain and mental disorder. Persons predisposed to attacks of cerebral disease and morbid affections of the mind, ought never to permit a condition of sleeplessness, or even a state of disturbed and broken rest, to continue for many consecutive nights, without seriously considering their state of bodily, cerebral, and mental health.

"In the premonitory stage of some forms of acute insanity, and particularly of delirium tremens, the patient is in a constant state of sleeplessness by night and restlessness by day. His repose, at first,

is broken and disturbed. He slumbers lightly, and has only snatches of sleep. If asleep, the slightest noise or ruffle of the bed-clothes, awakens him; and when aroused *he looks like a person whose eyes had never been closed in sleep!* This is a characteristic and significant symptom of the *insomnia of incipient insanity*.

"In conditions of healthy sleep the vital energy or nerve force is supposed to be reproduced, evolved, or regenerated in the vesicular neurine, and the individual commences his morning's work, whether it be of a mental or muscular character, with a renewed supply of the powers of life or nervous energy, sufficient to carry him successfully through the day's regular and appointed duties; but the partial and unhealthy snatches of repose obtained in certain states of brain disorder do not appear to refresh or invigorate the system. In this condition of cerebral activity, irritability, or disease, the grey matter of the brain is incapable of eliminating normal conditions of *nerve* or *vital* force.

"A state of wakefulness is frequently consequent upon an unduly worked and agitated brain, and is often exhibited by persons of a nervous and excitable temperament, who have been subject to great anxiety, or whose intellects have been overwrought and unduly strained. When addressing himself to the importance of anticipating the first dawns of the cerebral diseases of children, as well as those of adult age, Dr. Graves observes, 'You will find in patients who are about to have cerebral symptoms a degree of restless anxiety, and a higher degree of energy, than accords with their condition. They either do not sleep at all, or their sleep is broken by startings and incoherent expressions. When a person is spoken to in this state, he answers in a perfectly rational manner; he will declare that he has little or no headache; and were the physician to be led away by a hasty review of his symptoms, would be very likely to overlook the state of the brain. If a close inquiry be made, it will be found, that *the patient scarcely ever sleeps, or even dozes*—that he is irritable, excitable, frequently incoherent, and muttering to himself. Under such circumstances, although there is no remarkable heat of scalp, suffusion of the eye, or headache, the medical attendant must suspect the supervention of cerebral symptoms, particularly about the ninth or tenth day of the fever (for it is generally about this period that cerebral symptoms begin to manifest themselves), and whenever these premonitory indications are observed, the physician should not hesitate to take proper measures to anticipate the evil. In other cases, the encephalic symptoms are ushered in by drowsiness. The patient seems otherwise well, *but he sleeps too much*. About the ninth or tenth day he begins to rave, and exhibits undoubted proofs of congestion and excitement of the brain. To be put on our guard is to be armed in such cases.'*

* "Clinical Medicine," by Dr. Graves.

"In some forms of cerebral irritation and capillary congestion the patient feels an intense and overpowering desire to sleep. *He experiences a heavy and drowsy sensation, but is unable to close his eyes in slumber for many minutes.* He often continues for hours in this state of semi-sleeplessness or morbid drowsiness, without actually sleeping or feeling at all refreshed. This condition of the brain, if permitted to continue for any lengthened period, is productive of much, and often fatal, mental and bodily mischief.

"Cases of what may be termed idiopathic sleeplessness occasionally occur, in which the intellect is not (for a period), in the slightest degree disordered. Persons have been known to remain in this state of insomnia for several weeks, *never closing their eyes for five continuous minutes in sleep!* In one female patient the state of sleeplessness arose from a severe shock which she had received, consequent upon finding her husband, in the middle of the night, dead by her side, he having retired to bed apparently in excellent health. In these cases, the patients are seldom heard to complain of the want of sleep; they appear to experience none of the usual sensations of bodily and mental fatigue, physical uneasiness, and discomfort, which follow ordinary states of partial and incomplete repose.

"Persons actively engaged in literary pursuits, and whose occupations absorb a large amount of nervous energy and energetic thought, are subject to conditions of insomnia. It is said that Paganini rarely slept, so entirely was his mind occupied, night and day, in his intense passion for music. Boerhaave is recorded not to have closed his eyes in sleep for a period of *six weeks*, in consequence of his brain being overwrought by intense thought on a profound subject of study.*

"The insane are capable of sustaining, with apparent impunity and indifference, long-continued conditions of sleeplessness. The case is published of a deranged person who was not known to close his eyes in sleep for the period of *three months!* He was in the habit of walking long distances, greatly excited during the day, and at

* "The question, how long a person can exist without sleep, is one oftener asked than answered, and the difficulties of answering the question by experiment would seem to leave it forever unsolved. A Chinese merchant had been convicted of murdering his wife, and was sentenced to die by being deprived of sleep. This painful mode of death was carried into execution under the following circumstances:—The condemned was placed in prison under the care of three of the police guard, who relieved each other every alternate hour, and who prevented the prisoner from falling asleep night or day. He thus lived nineteen days without enjoying any sleep. At the commencement of the eighth day his sufferings were so intense that he implored the authorities to grant him the blessed opportunity of being strangled, guillotined, burned to death, drowned, garroted, shot, quartered, blown up with gunpowder, or put to death in any conceivable way which their humanity or ferocity could invent. This will give a slight idea of the horrors of death from want of sleep."—*Semi-Monthly Medical News*. Louisville, 1859.

night he never ceased talking to imaginary persons. No form or dose of opium had any effect upon him. Dr. Wigan had a patient under his care who did not sleep for fifteen days. He was in the habit of getting up in the night, and tiring three horses with galloping, in the vain hope that excessive muscular fatigue might induce a disposition to sleep!

"The pathological state of the brain may account for the condition of sleeplessness so often seen associated with insanity, but in many cases the insomnia connected with mental derangement arises from a complete absorption, abstraction, concentration of the thoughts and pre-occupation of the mind, in some terrible and fearful form of illusion, or frightful type of hallucination, that has firmly seized upon the morbid imagination.

"The snatches of transient repose which those so unhappily afflicted are able to obtain,

'Are not sleep,
But a continuance of enduring thought.'"

The closing chapter of the book, "On the General Principles of Cerebral Pathology, Diagnosis, Treatment, and Prophylaxis," is one of much interest and practical value. It claims to be only a cursory view of the subjects referred to, but is more than an earnest of the learned and exhaustive treatment which will be given them in the volumes which are to follow. After a brief outline of the present state of cerebro-mental pathology, its difficulties and its importance, the general principles of the diagnosis of insanity are referred to as follows:—

"By what general principles is the physician to be guided when attempting accurately to diagnose between mental aberration and those abnormal states of thought, and erratic flights of fancy, which so closely resemble, in many of their modes of manifestation, alienation of reason? Is mental pathology a certain and exact science, and are its *data* so clearly established, and the conclusions deduced therefrom so accurately defined, as to enable the psychological physician to speak with authority and confidence of the actual presence of aberration in every case of suspected or alleged deviation from a healthy standard of intellect?

"Is it possible clearly to discriminate eccentricity, vice, and crime from insanity, or to fully appreciate the precise position of the frontier that marks the boundary between extraordinary departures from ordinary modes of thought and conduct (consistent with sanity and responsibility of mind), and those deviations from states of thinking and action utterly irreconcilable with the hypothesis of mental soundness?

"When does violent and ungovernable passion become symptomatic of psychical disorder, and what extent of brutality, prodigality, cruelty, parsimony, revenge, and jealousy is compatible with intellectual sanity? When does an idea which has acquired an influence over the imagination, obviously incommensurate with its value, cease to be healthy in its character, and become a monomaniacal conception?"

"Admitting the difficulties that undoubtedly surround a solution of these subtle questions, I am, nevertheless, of opinion, that the carefully and cautiously observant, and practically educated physician will encounter no *bonâ fide* impediment in his attempt to diagnose between actual disorder of the mind (insanity) and other states of intellect, emotion, and conduct, generally supposed to be allied to, or confounded with it. The boundary line separating morbid from analogous states of thought, is no doubt occasionally obscure, faint, and shadowy, and cases occur which puzzle and confound the most sagacious and experienced psychologists.

"I have elsewhere spoken of the impossibility of defining insanity, and pointed out briefly not only the rules that should guide the physician when called upon to investigate a subtle and complex case of morbid thought, but the serious error that would be committed if he, whilst making an analysis of such types of alleged mental unsoundness, were to restrict himself to a consideration of the then manifested state of intellect, utterly disregarding the normal psychical development and ordinary modes of thinking and action generally characteristic of the person whose sanity of mind and conduct is under his consideration.

"As a general rule, derangement of mind, whether it consists in a vitiation of the mental, emotional, or moral psychical element, or exhibit itself in actions different from those generally considered to be the effect of a sane, well-governed, and rightly-balanced understanding, ordinarily manifests itself by a marked deviation from natural states of thought, and normal modes of conduct. I have entered at length into an analysis of this subject in a former part of this work, and to the remarks there made I refer the reader.

"There are three affections of the cerebro-spinal system with which insanity is liable to be confounded: viz., 1. A state of depression, or hyperæsthesia of the nervous functions, generally designated nervous disorder; 2. Delirium tremens; 3. Ordinary attacks of congestion of the brain, meningitis, acute and chronic encephalitis.

"It has been propounded as an axiom by a well-known English psychological authority, that all disorders of the nervous system are but *degrees* of insanity. If such a *dictum* were to be universally admitted and generally acted upon, how mischievous and sad would be the consequences! There is a vast amount of nervous derangement, of a very formidable and distressing character, which has no pathological connexion with, or psychical relation to, mental derangement.

"I have detailed in the chapter on the Morbid Phenomena of Conscious Insanity, several illustrations of this type of incipient alienation of thought. But this state of unhealthy apprehension of the approach of insanity very often exists as a *nervous disorder* without being complicated with, or passing into a phase of, mental derangement. I have seen many remarkable examples of the kind in connexion with various forms of acute hysteria.

"There are other affections of the nervous system that resemble in many of their features mental alienation. In such cases there is often great emotional exaltation, perversion of the instincts, confusion of thought, exaggeration closely bordering on aberration of ideas, as well as great eccentricities of conduct. Such symptoms may exist independently of insanity, as a distinct type of nervous disorder. It is only when the mind exhibits signs of positive alienation, manifested by the presence of delusion associated with a paralysis of the controlling power (the will), that we can satisfactorily affirm that insanity, in the right acceptation of the term, has clearly and unmistakably exhibited itself. I do not affirm that a delusive impression is always appreciable in incipient or even in the more advanced forms of mental derangement, for there are many phases of alienation of mind often leading to the most fatal results where no apparently fixed false perception can be detected.

"The experienced physician is not likely to confound delirium tremens, clearly the consequences of an excessive indulgence in, or the effect of a *sudden* abstraction of stimulants from the brain, with insanity. The acute accession of the delirium; remarkable insomnia which precedes its development, and continues through its course; peculiar muscular tremor; anxiety and distress of mind so characteristically marked in the physiognomy; the *fussy* and *busy* nature of the delirium; fumbling of the bed-clothes; extreme loquacity of the patient; peculiar sensorial illusions; suffused face; injected conjunctivæ; soft and feeble pulse; moist and creamy tongue; wild look of suspicion, terror, and alarm; clammy state of the skin, accompanied by a peculiar cutaneous exhalation similar to that observed in rheumatism; great agitation of manner, and unceasing restlessness, are all specific and peculiar diagnostic features of this type of cerebro-mental disorder, clearly distinguishing it from insanity.

"In considering the subject of cerebral congestion, it will be necessary to diagnose between active determination to, and arterial congestion of the brain, as well as to distinguish the latter condition from one of venous plethora. The ordinary symptoms of active determination are cephalalgia of an acute type, a feeling of tension, weight, or heaviness in the head, severe vertigo, aggravated whenever the patient stoops, suffusion of the face, injected conjunctivæ, distressing noises in the ears, sensorial hyperæsthesia, activity of the arterial circulation, recognized by undue action of the temporal and radial arter-

ies, depression of spirits, apprehensions of an approaching calamity, optical illusions, increased temperature of the scalp, wakefulness, or disturbed sleep, accompanied with frightful dreams, sudden muscular twitchings and spasmodic startings.

"It is difficult to define when the preceding cerebral state of active determination passes into a condition of congestion. In the former affection there exists marked hyperæsthesia of the ordinary functions of the cerebrum, whereas in the state of hyperæmia the symptoms indicate an opposite condition of the brain. This depression of the cerebral functions is marked by a sensation of dull, heavy weight in the head, seldom amounting to acute cephalalgia. The patient complains of vertigo and obtuseness of hearing. In many cases there is partial amaurosis. The intellectual faculties are in an inactive state. The memory is impaired, thoughts confused, and all the great functions of life are in a state of severe vital depression.

"The insidious, slow, and progressive advance of insanity, exhibiting itself in the majority of cases, by great singularity of conduct, delusive ideas, and clear deviations from normal modes of thinking and acting, as well as by an absence of the acute cerebral symptoms (except in cases of mania) that mark the condition of active determination and hyperæmia, will assist the practitioner in arriving at an accurate diagnosis. Again, insanity is easily distinguished from the acute symptoms of meningitis and cerebritis. These inflammatory affections are accompanied by severe cephalalgia, occasionally fugitive in its character, sense of weight and fulness in the head, flushing of the face, heat of the scalp, lethargy, attacks of vertigo, exaltation of the sense of hearing, seeing, and smelling, optical illusions, tinnitus aurium, injected conjunctivæ, full and laborious pulse, sudden startings during heavy sleep, as if the patient were alarmed by a frightful dream, bowels obstinately constipated, pupils contracted, skin dry and parched, and the mental condition alternating between delirious excitement and depression. With the preceding symptoms there will occasionally be great irritability of the stomach, sometimes amounting to actual vomiting. Inflammation of the membranes and substance of the brain (affections very difficult to distinguish from each other) is often complicated with delirium (different in its character from the delusions and hallucinations of insanity) as well as with convulsions."

Our notice must conclude with the remarks on "Treatment and Prophylaxis," which follow the portion already quoted. The nature of the treatise will be our excuse for having chosen, although thus imperfectly, to set forth its scope and purpose by quotation, instead of criticising its principles or method. These principles, rather suggested than assumed, and the method, which is only an order in

which a mass of cases is arranged, suffice, however, to form a most useful stand-point from which the student of mental medicine may enlarge his experience, or enter to the best advantage upon the difficult investigations to which he is soon to be introduced. Dr. W. says :—

“ In all acute affections of the brain and disorders of the mind the cure and life of the patient depend, 1. *Upon the speedy detection of incipient symptoms* ; 2. *Upon the accuracy of the diagnosis formed as to the nature of the cerebral affection* ; 3. *Upon the immediate application of remedial treatment.*

“ I propose, in the first instance, to consider briefly the general principles that should guide the practitioner in the treatment of incipient insanity.

“ The treatment of the early stage of insanity requires great delicacy, discrimination, and judgment. Under these circumstances, where the brain is in a morbid state of irritation, and the mind struggling between sanity and insanity, the person being conscious that his ‘ wits ’ are beginning ‘ to turn,’ the medical attendant should proceed cautiously and discreetly in his examination. If the patient be led to believe, from the conduct of the physician or from anything which falls from him, that derangement of mind is suspected, the most painful and disastrous consequences in all probability will ensue. In the early stages of insanity the patient’s suspicions are morbidly excited. He has a dread of ‘ going mad ; ’ expresses a horror of such a calamity, and often most positively refuses to allow himself to be questioned on the subject of his mental health. Should the patient believe that he is imagined to be deranged, he will sometimes exhibit great violence and excitement.

“ If the practitioner proceeds judiciously in his inquiry, he may generally succeed in effecting his object without inducing the patient in the slightest degree to suspect the purpose of his visit. In many cases the physician may administer remedial agents, and succeed in warding off an attack of acute insanity, without conveying to the mind of the patient an intimation of the suspicions which exist as to his state of mind. When a medical man is called in to a case of this description, it his duty first to direct his observations to the state of the general health. He will almost invariably detect either hepatic, gastric, cardiac, renal, or intestinal disorder which may be irritating and sympathetically disordering the brain. By the timely use of appropriate remedies, these affections may speedily be removed.

“ It may occasionally be necessary to relieve the over-loaded condition of the vessels of the brain. The patient often complains of severe headache, attended with an increase of temperature, for the relief of which the application of a few leeches, cold evaporating lo-

tions, and ice to the head may be recommended. Great caution is, however, necessary in the use of depleting and antiphlogistic measures. Alas ! how often have patients, who have been injudiciously treated by such means, sunk into incurable chronic melancholy. In recent attacks, occurring in young and plethoric subjects, when the symptoms are closely allied to inflammation of the brain, local blood-letting is often attended with the happiest results.

"In considering the physical treatment of insanity, it is essentially necessary that we should clearly understand upon what pathological condition of brain the morbid state of the mind depends. I think it may be safely laid down, as a general principle, that the brain, in cases of mania, even of the most exalted kind, is not necessarily in a state of active congestion or inflammation. The character of insanity, the symptoms which usher it in, and mark its progress, all unequivocally establish that alienation of mind frequently arises from a cerebral disorder, unaccompanied with vascular activity or turgescence.

"In obscure and doubtful cases tartrate of antimony will be found an excellent substitute for bleeding. Violent maniacal excitement, accompanied by every apparent indication of a high degree of cerebral congestion and inflammation, will often yield to the administration of this drug. The physician should begin with small doses, and gradually increase them, until the patient is able to take two or three grains without exciting actual vomiting.

"On the subject of depletion in insanity, Dr. Seymour observes—'In the great majority of cases, the functions of the brain in mental derangement are increased in force, while the circulation is depressed, extremely quick and feeble, and the action of the heart gives way to the smallest abstraction of blood ; and yet these are often attended by raving delirium, great increase of muscular force, and are, in fact, what are termed *high* cases. The consequence of such practise is, either the more frequent return of the high stage, or the patient sinks into one approaching idiocy.'

"When bleeding is clearly inadmissible, cold applied to the head will be found not only to diminish vascular excitement, but to lessen powerfully the morbid sensitiveness of the cerebral organs. Should there, however, exist a tendency to active plethora and apoplexy, cold lotions and ice should be used with great caution. The prolonged hot bath, in conjunction with the cold *douche*, will often be found most efficacious in subduing maniacal excitement. I have witnessed the mental perturbation of incipient insanity frequently yield to this potent remedy. The *douche* is to be used when the patient is in the hot bath.

* * * * *

"In the treatment of incipient insanity, clearly unconnected with active head symptoms, there is no remedy which so effectually mas-

ters the disease as that of opium in one of its many formulæ. I am satisfied that a vast amount of mental derangement may be successfully treated in its early stage by the continuous and persevering administration of sedatives. When insanity is clearly associated with a depressed condition of the vital powers, evidenced by a weak pulse, feeble action of the heart, and general anæmic state of the system, the exhibition of the hydrochlorate, acetate, or muriate of morphia, *combined* with iron and quinine, will, in a great majority of cases, be found to act like a charm in arresting the progress of the mental malady.

"In some forms of insanity, belladonna, conium, hydrocyanic acid, chloroform, Indian hemp, henbane, stramonium, and hops, may be administered with advantage. It is obvious that no particular instructions can be given for the administration of these remedial agents. Much must necessarily be left to the judgment of the practitioner, who should be directed in the application of sedatives by the peculiar circumstances of each individual case presented for his consideration. It will be occasionally found necessary to administer opium by what is termed the endermic method, as well as by enemas. In some cases of acute maniacal excitement, I have found great benefit from the careful use of chloroform by inhalation. In epileptic and other forms of delirium this anæsthetic agent may be occasionally used with much advantage. It will often be found beneficial in cases of acute mental excitement to give, in combination, digitalis and opium. I have known instances of active cerebral and mental disorder to yield to this mode of treatment after other remedies have failed."*

* We have received a copy of Dr. Winslow's treatise, as republished, in an excellent style, by Messrs. Blanchard & Lea, Philadelphia, Pa.—[EDS.]

SUMMARY.

ON THE INSANITY OF CHILDREN.—M. Brierre du Boismont has lately published some remarks upon this subject, in noticing the dissertation of M. le Paulmier.

* * * * *

M. Brierre du Boismont has himself noted four cases, of children of six, seven, and ten years of age, in whom the symptoms of mental disease were manifest; and at present he has under his care a female child of three and a half years old, born of a paralytic father, which

shows the strangest caprices; at one time sad and melancholy, again in the most violent fits of rage, without any cause, and not to be appeased. The intelligence of the child is far beyond its years.

The cases of insanity brought under notice by Le Paulmier cannot be said to belong to childhood; his children are young people; for of thirteen examples, three are fourteen, two fifteen, three sixteen, and five seventeen years of age. Before, however, analysing Le Paulmier's work, Briere du Boismont turns to English, French, and American authors for information on the subject. In Turnham's "Observations and Statistics of Insanity" there is a table of 21,333 cases. Under ten years, eight cases, and from ten to twenty, 1161 cases are noted. According to Turnham, the greatest number of cases of insanity occurs between thirty and forty. In the United States, however, physicians have remarked the disposition to mental disease is stronger between twenty and thirty than between thirty and forty; and this is fairly ascribed to the earlier age at which young men enter the world and engage in business and politics. One of these beardless men of business said to his physician, "I am convinced this kind of life which I lead will drive me mad or kill me; but I must go on." In four American asylums, which contained 2790 patients, 33.73 per cent. were between twenty and thirty, and 24.41 per cent. between thirty and forty years of age.

That the kind of education which the youth in the United States receive has a powerful influence on the development of insanity is proved by Evans and Worthington, in their reports of the Pennsylvania asylums.

Dr. Wigan gives, in his unpublished writings, an account of crimes committed by young people without any object. The age of the youthful malefactors was between sixteen and seventeen for girls, and between seventeen and eighteen for boys. There was this in common, that there had not previously existed the slightest animosity towards the persons against whom they perpetrated outrages. According to Wigan, the greater number of these young people had epistaxis, which, among the females, appeared with the regularity of menstruation. The crimes were generally committed after the temporary cessation of this habitual flux.

Delasiauve and Schnepf have also furnished information on the insanity of early life. The statistics of v. Bouteville exhibit insanity amongst children in no insignificant proportion. The maximum is presented between the ages of thirty and thirty-four. From five to nine, 0.9 per cent.; ten to fourteen, 3.5; from fifteen to nineteen, 20 per cent.

Aubanel and Thorpe observed in the Bicêtre, in the year 1839, eight cases of mania in children, and one of melancholia, from the age of eleven to eighteen years. Mental disease is undoubtedly more frequent in childhood than is generally supposed. Hereditary tend-

eney to disease, and ill-directed education, play an important part in its production.

A writer in the *Revue des Deux Mondes*, for August, 1848, has with much ability accounted for the frequency of insanity in France. Le Paulmier recognises three forms of mania—maniacal excitement (*excitation maniaque*), mania, and incoherent mania. In the first grade of mania the dissociation of ideas is not always recognisable—it nearly resembles the early stage of drunkenness; in the more advanced degree the dissociation of ideas is remarkable; while in the highest it is such, that no longer two sentences, and sometimes not even two parts of one sentence, are connected.

The diagnosis of the mania of children is at times difficult; meningitis may be confounded with it; but in general the headache, the dilatation of the pupils, and the nausea and repeated vomiting, afford means of fixing the line of demarcation. Mania with stupor (*d'une sorte de stupeur exaltique*) approaches closely certain forms of mental alienation which occur after epileptic seizures, and in which the excitement is associated with obtuseness and hallucinations (*obtusion hallucinatoire*). With respect to prognosis, the insanity of early life, according to the observations of Le Paulmier, ends in recovery; however, Delasiauve has made the remark, that a great susceptibility remains, a disposition to a return of the mental disease; and accordingly, that many patients may be found in the wards appropriated to adults, who had formerly been successfully treated in the division assigned to children.

M. Brierre du Boismont concludes his notice of M. le Paulmier's dissertation by giving the result of his own experience. He says, that in a list of forty-two young people in whom the mental disease commenced between fourteen and sixteen years of age, eighteen times was it inherited from their parents.

In by far the greater number of cases, the disease has manifested itself partly under the influence of hereditary predisposition, and partly under the influence of puberty or menstruation. On inquiring from the parents the character of the children, the answer has almost always been, that they were, without any cause, sometimes sad, and at other times wild and ungovernable; they could never apply themselves steadily to work; they had no talent, or if it existed, it only flared up brilliantly for a moment; they would submit themselves to no rules. Some were apathetic, and were not to be excited by emulation; others exhibited a volatility which could not be restrained; many had been subject to spasmodic attacks. The incubative period was often protracted. In eighteen instances recovery took place, but the persons were liable to relapse; there also remained a remarkable strangeness of character, and an inability to assume any fixed position in life. Some afforded insecure evidence of the recovery being permanent. The conclusion is, that though, in a certain number

of cases, recovery takes place, the mental alienation of children and young people is a most serious disease—partly from their antecedents, and partly on account of the imperfect development of the organs. Adducing the foregoing facts in opposition to Le Paulmier's, M. Briere du Boismont nevertheless accords to the dissertation the meed of his approbation, looking upon it as the production of a thinking mind, and as a proof that themes selected by authors themselves are more productive of fruit than those which are the subjects of prize essays. —*Journal of Psychological Medicine.*

CRIMINAL LUNATICS IN ENGLAND.—Criminals removed from the bar by the finding of the jury that they are of unsound mind have hitherto been ordered into confinement during her Majesty's pleasure. Punishments were so protracted, when thus inflicted, that advocates have been advised to withdraw the well-grounded plea of unsoundness of mind from the record in defence, because the penalty of this misfortune would be far more severe than that for the offence charged. Again, ruffianly scoundrels, laboring under a temporary aberration at the time of trial, have remained sane among the insane, violent criminals among the helplessly afflicted, requiring personal restraint and the severity of prison rules in an institution which is devoted to the treatment and consolation of those mentally diseased. These anomalies have now ceased to exist. An Act has just been passed to amend the Act regulating the Queen's Prison. Prisoners sent to Bethlehem Hospital, under the former Act, may now be removed, and be dealt with as if they were persons of sound mind when it is certified that their reason is restored.—*Leeds (Eng.) Times.*

APPOINTMENTS.—Dr. R. J. Patterson, Supt. of the Ohio State Asylum for Idiots, has been appointed Superintendent of the new State Hospital for the Insane, at Mt. Pleasant, Iowa.

Dr. J. P. Clement, formerly Assistant Physician at the Vermont Asylum for the Insane, has been appointed Superintendent of the State Hospital for the Insane, at Madison, Wisconsin, in place of Dr. J. Edwards Lee, resigned.

MEDICAL JOURNALS RECEIVED.

Oesterreichische Zeitschrift für Practische Heilkunde. Vienna.
 Annales Médico-Psychologiques. Paris.
 Journal de la Physiologie de l' Homme et des Animaux. Paris.
 Archives des Sciences Physiques et Naturelles. Geneva.
 Quarterly Journal of Microscopical Science. London.
 The Dublin Medical Press. Dublin.
 British and Foreign Medico-Chirurgical Review. London. N. York Re-print
 Ranking's Half-Yearly Abstract. London. Philadelphia Re-print.
 New York Journal of Medicine. New York.
 American Medical Gazette. New York.
 American Medical Monthly. New York.
 The Scalpel. New York.
 North American Medico-Chirurgical Review. Philadelphia.
 American Journal of the Medical Sciences. "
 The American Journal of Dental Science. "
 The Medical News and Library. "
 The Medical and Surgical Reporter. "
 The American Journal of Pharmacy. "
 Journal of the Franklin Institute. "
 Journal of Prison Discipline and Philanthropy. "
 The Dental Cosmos. "
 The American Law Register. "
 Quarterly Summary of the Transactions of the College of Physicians of
 Philadelphia. Philadelphia.
 The Maryland and Virginia Medical Journal. Baltimore and Richmond.
 The Charleston Medical Journal and Review. Charleston, S. C.
 Atlanta Medical and Surgical Journal. Atlanta, Ga.
 Southern Medical and Surgical Journal. Augusta, Ga.
 Oglethorpe Medical and Surgical Journal. Savannah, Ga.
 New Orleans Medical and Surgical Journal. New Orleans.
 St. Louis Medical and Surgical Journal. St. Louis, Mo.
 Nashville Journal of Medicine and Surgery. Nashville, Tenn.
 Nashville Monthly Record of Medical and Physical Science. Nashville, Tenn.
 Cincinnati Lancet and Observer. Cincinnati, Ohio.
 The Western Law Monthly. Cleveland, O.
 The Chicago Medical Journal. Chicago, Ill.
 Chicago Medical Examiner. Chicago, Ill.